


FILE NOW: FILING FEE IS \$61.25

**FILED**  
**Mar 29, 1999 8:00 am**  
**Secretary of State**

03-29-1999 90030 032 \*\*\*\*61.25

NONPROFIT CORPORATION ANNUAL REPORT <b>1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # N12867**

1. Corporation Name  
**LA MIRAGE OF HARBOR VILLAGE CONDOMINIUM ASSOCIATION, INC.**

Principal Place of Business UNITED COMMUNITY MGMT 3300 UNIVERSITY DRIVE #405 CORAL SPRINGS FL 33065 US	Mailing Address UNITED COMM. MGMT 3300 UNIVERSITY DRIVE #405 CORAL SPRINGS FL 33065 US
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2. Principal Place of Business 21 Suite, Apt. #, etc.	2a. Mailing Address 26 Suite, Apt. #, etc.	3. Date Incorporated or Qualified 01/06/1986
22 City & State	27 City & State	4. FEI Number 59-2434491
23 Zip Country	28 Zip Country	5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>
24	25	29
30	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	

9. Name and Address of Current Registered Agent UNITED COMMUNITY MGMT CORP. 3300 UNIVERSITY DRIVE #405 CORAL SPRINGS FL 33065	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City <b>FL</b> 85 Zip Code
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D- <input type="checkbox"/> DELETE	1.1 TITLE	JD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROSE, MIKE	1.2 NAME	
STREET ADDRESS	21140 JIB CT, #L-14	1.3 STREET ADDRESS	
CITY-ST-ZIP	N MIAMI BCH FL	1.4 CITY-ST-ZIP	
TITLE	TD <input checked="" type="checkbox"/> DELETE	2.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JOHNSON, RAY	2.2 NAME	Carleen Rosado
STREET ADDRESS	21190 MAINSAIL CIRCLE, A-18	2.3 STREET ADDRESS	21160 mainsail circle H-12
CITY-ST-ZIP	N MIAMI BCH FL	2.4 CITY-ST-ZIP	Aventura, Fl. 33180
TITLE	PD <input type="checkbox"/> DELETE	3.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MARS, BEVERLY	3.2 NAME	Arlene Gottlieb
STREET ADDRESS	21160 MAINSAIL #H-11	3.3 STREET ADDRESS	21160 mainsail circle H-14
CITY-ST-ZIP	N MIAMI BCH FL	3.4 CITY-ST-ZIP	Aventura, Fl. 33180
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	
NAME	FRANKLE, GERARD	4.2 NAME	
STREET ADDRESS	21120 TOB CT #K-11	4.3 STREET ADDRESS	
CITY-ST-ZIP	N MIAMI BCH FL	4.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	5.1 TITLE	
NAME	ALLEN, GEORGE	5.2 NAME	
STREET ADDRESS	21180 MAINSAIL CIR B-13	5.3 STREET ADDRESS	
CITY-ST-ZIP	N MIAMI BCH FL	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: S. Beverly Mars, Pres. 3-18-99  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2F037-11/98

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