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NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

N16058

(2)

## FILED Mar 16 1998 8:00am Secretary of State

LOST	TREE CLUB CONDOMINIUN	A ASSOCIATION, INC.		 	
Principal Plac	e of Business	Mailing Address		F ROUPHON OUR RIGHT OUT OF OUR THE STREET	ii gibil gidit gidii didil bidil <del>bi</del> bil indl
11380 PROSPERITY FARMS ROAD STE 216 B PALM BEACH GARDENS FL 33410 US		P O BOX 14812 P.O. BOX 14812 N PALM BEACH FL 33408 US		<ul> <li>3. Date Incorporated or Qualified</li> <li>07/28/1986</li> <li>4. FEI Number</li> <li>59-1606834</li> </ul>	Applied For Not Applicable
2. Principal P	Place of Business	2a. Mailing Address		5. Certificate of Status Desired	\$8.75 Additional
21	# ala	26 Suite Ant # 210			Fee Required
Suite, Apt.	#, BIC.	Suite, Apt. #, etc.		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
City & State		City & State			
23		28		7. Is this nonprofit corporation a homeowners association?  Yes No	
Zip	Country	Zip	Country	8. This corporation owes or has paid	
24	25		30	Personal Property Tax due June 3  10. Name and Address of New Reg	
	9. Name and Address of Curren	it negistered Allerit	81 Name	ID. Name and Address of New Neg	stereo Agent
ROZELLE, PATRICIA 522 E. TALL OAKS DR.					
		82 Street Add		ddress (P.O. Box Number is Not Acceptable	<sup>3)</sup>
	EACH FL 33410		83		
			84 City		B5 Zip Code
11. Pursuant office or r	to the provisions of Sections 617.050 registered agent, or both, in the State	2 and 617.1508, Florida Statute of Florida. Such change was a	s, the above-named co uthorized by the corpor	orporation submits this statement for the purration's board of directors. I hereby accept	the appointment as registered
11. Pursuant office or reagent. I a	to the provisions of Sections 617,050 egistered agent, or both, in the State im familiar with, and accept the obligation.	2 and 617.1508, Florida Statute of Florida. Such change was a ations of, Section 617.0503, Flo	s, the above-named countries the corpor rida Statutes.	orporation submits this statement for the puration's board of directors. I hereby accept	the appointment as registered
SIGNATURE	to the provisions of Sections 617.050 egistered agent, or both, in the State m familiar with, and accept the obligations of the state o		s, the above-named couthorized by the corpor rida Statutes.  Registered Agent signature rec		the appointment as registered
SIGNATURE		ont and title if applicable. (NOTE		quired when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE IRS AND DIRECTORS IN 12
SIGNATURE	Signature, typed or printed name of registered age OFFICERS ANI	ont and title if applicable. (NOTE	Registered Agent signature rec 13.	quired when reinstating)  ADDITIONS/CHANGES TO OFFICE	DATE
SIGNATURE	Signature, typed or printed name of registered age OFFICERS AND STD ROESSNER, GILBERT	ont and title if applicable. (NOTE	Registered Agent eignature rec. 13. 1.1 TITLE	quired when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE  PS AND DIRECTORS IN 12  Change Addition
SIGNATURE	Signature, typed or printed name of registered age OFFICERS AN STD ROESSNER, GILBERT 2 CHURCH LANE #120-121	ont and title if applicable. (NOTE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	additions/Changes to office D Kugan, John 5 Church Lane, #159	DATE  THE AND DIRECTORS IN 12  Change Addition
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS ANI STD ROESSNER, GILBERT 2 CHURCH LANE #120-121 N. PALM BEACH FL	ont and trile if applicable. (NOTE D DIRECTORS DELETE	Registered Agent signature rec  13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	quired when reinstating)  ADDITIONS/CHANGES TO OFFICE  Company  A 159	DATE  PRIS AND DIRECTORS IN 12  Change Addition
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4. I hereby certify that the information supplied with this filling 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.

SIGNATURE: ( Sotto Company Company Company Republic Solo Company)

CHZE037 (1099