

FILE NOW: FILING FEE IS \$61.25

FILED

Mar 27 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N20588** (2)

1. Corporation Name

STONEBROOK AT COUNTRY WALK HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

**14601 COUNTRY WALK DR
MIAMI FL 33186
US**

**14601 COUNTRY WALK DR
MIAMI FL 33186
US**

3. Date Incorporated or Qualified

05/11/1987

4. FEI Number

65-0036800

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 **P.O. BOX 924176**

22 City & State

27 City & State
HOMESTEAD, FLORIDA

23 Zip Country

28 Zip Country
33092

5. Certificate of Status Desired

☒ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution

☐ **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☒ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**GOOCHMAN-GUENTHER, JOYCE
10723 SW 104 ST
MIAMI FL 33176**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	DAWES, ORIZA M	
STREET ADDRESS	14601 COUNTRY WALK DR	
CITY-ST-ZIP	MIAMI FL 33186	

TITLE	VD	☒ DELETE
NAME	VILLALBA, ROBERTA	
STREET ADDRESS	14601 COUNTRY WALK DR	
CITY-ST-ZIP	MIAMI FL 33186	

TITLE	TD	☐ DELETE
NAME	RICHMAN, STEVEN	
STREET ADDRESS	14601 COUNTRY WALK DR	
CITY-ST-ZIP	MIAMI FL 33186	

TITLE	SD	☒ DELETE
NAME	MOYANO, LOUIS	
STREET ADDRESS	14601 COUNTRY WALK DR	
CITY-ST-ZIP	MIAMI FL 33186	

TITLE	D	☐ DELETE
NAME	ORTIZ, PABLO	
STREET ADDRESS	14601 COUNTRY WALK DRIVE	
CITY-ST-ZIP	MIAMI FL	

TITLE	D	☐ DELETE
NAME	MENENDEZ, CARLOS	
STREET ADDRESS	14601 COUNTRY WALK DRIVE	
CITY-ST-ZIP	MIAMI FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	SD	☐ Change ☒ Addition
1.2 NAME	EMANUEL, LOISBETH	
1.3 STREET ADDRESS	14511 SW 138 PLACE	
1.4 CITY-ST-ZIP	MIAMI, FL. 33186	

2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		

3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		

4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		

5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		

6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
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.

SIGNATURE:

Oriza Dawes Pres.

3/19/98

CP2E037 (10/97)