FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N21067

(6)

ESTATE HOMES AT EMERALD FOREST HOMEOWNERS' ASSOC IATION, INC.

Principal Place of Business Mailing Address 2994 JOG RD. 2994 JOG RD. 3. Date Incorporated or Qualified STE. B 06/09/1987 **GREENACRES FL 33467 GREENACRES FL 33467** 4. FEI Number Applied For 65-0056906 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired П 21 26 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. \$5.00 May Be 6. Election Campaign Financing 22 27 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? 23 28 Yes Zip Country Country B. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name MURPHY, DORIS Street Address (P.O. Box Number is Not Acceptable) 1040 SWEETBRIAR PLACE 83 **WELLINGTON FL 33414** 84 City 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 apoppt the obligations of, Section 617.0503, Florida Statutes. 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Stephen J. Sacks SACKS, STEVE STEPHEN 1224 Columbine Pl NAME 1.2 NAME 1224 COLUMBINE PLACE STREET ADDRESS 1.3 STREET ADDRESS WELLINGTON FL CITY-ST-ZIP 1.4 CITY-ST-7IP DELETE TITLE 2.1 TITLE Change ☐ Addition PRIORE, TERRI MALE 2.2 NAME 1063 LAKE BREEZE DR. STREET ADDRESS 2.3 STREET ADDRESS WELLINGTON FL CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE DELETE ☐ Change Addition Addition 3.1 TITLE WAKEMAN, DAVE NAME 3.2 NAME STREET ADDRESS 1223 COLUMBIE PLACE 3.3 STREET ADDRESS WELLINGTON FL CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE Change Addition 4.1 TITLE LERNER, STEVE NAME 4. 2 NAME 1016 LAKE BREEZW DR. STREET ADDRESS 4.3 STREET ADDRESS WELLINGTON FL CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 5.1 TITLE Change Addition NAME KOUDELKA, JOHN 5.2 NAME 1303 LAKE BREEZE DR STREET ADDRESS 5.3 STREET ADDRESS WELLINGTON FL CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE 6.1 TITLE Addition POLINGER, LARRY 62 NAME 1120 LAKE BREEZE DR.

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 13 if changed, or on an attachment with an address. SIGNATURE: STEPHEN JAY SAN

STREET ADDRESS

CITY-ST-ZIP

WELLINGTON FL

(61.781.00sy

FILED

Apr 01 1998 8:00am

Secretary of State