


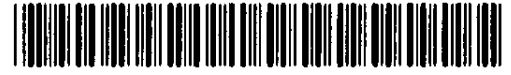
FILE NOW: FILING FEE IS \$61.25

FILED

**Apr 13 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 # N21096 (5)
1. Corporation Name
EMERALD FOREST ROAD ASSOCIATION, INC.



Principal Place of Business 4000 S 57TH AVE SUITE 101 LAKE WORTH FL 33463 US	Mailing Address 4000 S 57TH AVE SUITE 101 LAKE WORTH FL 33463 US
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3. Date Incorporated or Qualified 06/10/1987		
4. FEI Number 65-0056879	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No		
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

9. Name and Address of Current Registered Agent

**ALLAN ZIKER
13300 OPAL LANE
WELLINGTON FL 33414**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	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 617.1503, Florida Statutes.

SIGNATURE: *Allan Ziker* - ALLAN ZIKER
DATE: **4/3/1998**

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	ZIKER ALLAN	
STREET ADDRESS	13300 OPAL LANE	
CITY-ST-ZIP	WELLINGTON FL	
TITLE	VPD	<input type="checkbox"/> DELETE
NAME	STEVE GAGNE	
STREET ADDRESS	13182 A QUIET WOODS RD.	
CITY-ST-ZIP	WELLINGTON FL	
TITLE	S	<input checked="" type="checkbox"/> DELETE
NAME	LORI PAJENSKI	
STREET ADDRESS	1027 AVIARY RD.	
CITY-ST-ZIP	WELLINGTON FL	
TITLE	T	<input type="checkbox"/> DELETE
NAME	STEVE SACKS	
STREET ADDRESS	1224 COLUMBINE PL	
CITY-ST-ZIP	WELLINGTON FL	
TITLE	VPD	<input type="checkbox"/> DELETE
NAME	RICHARD SOMMERS	
STREET ADDRESS	1560 LAKE BREEZE DR.	
CITY-ST-ZIP	WELLINGTON FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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: *Allan Ziker* - ALLAN ZIKER
DATE: **4/3/98**

CR2E037 (10/97)