

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY -1 AM 11:29

DOCUMENT # **N24323** (0)

1. Corporation Name
PARKSIDE VILLAS CONDOMINIUM ASSOCIATION, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business
**C/O FALCON REAL ESTATE
721 SE 17 ST
FT. LAUDERDALE FL 33316**

Mailing Address
**C/O FALCON REAL ESTATE
721 SE 17 ST
FT. LAUDERDALE FL 33316**

3. Date Incorporated or Qualified **01/12/1988** 3a. Date of Last Report **04/19/1994**

4. FEI Number **65-0099819** Applied For Not Applicable

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. Nonprofit with IRS 501(c)(3) Tax Exempt Status **\$68.75 Supplemental Fee Not Required**

8. This corporation has liability for intangible tax under S. 109.032, Florida Statutes Yes No

CHANGE OF ADDRESS:

2. Principal Place of Business		2a. Mailing Address	
21 620 N.E. 9th Avenue	26 620 N.E. 9th Avenue	27	28
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
22	27	23 Ft. Lauderdale, Fl	28 Ft. Lauderdale, Fl
City & State		City & State	
24 33304	25 USA	29 33304	30 USA
Zip		Zip	
Country		Country	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
STEIN, BUD 620 NE 9TH AVE. #2 FT. LAUDERDALE FL 33304				81 Name	Dana Adler		
				82 Street Address (P.O. Box Number is Not Acceptable)	620 N.E. 9th Avenue #5		
				83			
				84 City	Ft. Lauderdale, FL	85 State	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: *Dana Adler* (DATE) **4/24/95**

Signature, typed or printed name of registered agent and the # applicable (NOTE: Registered Agent signature required when reconstituting)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	President PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STEIN, BUD	12 NAME	Sandra Andersen
STREET ADDRESS	620 NE 9TH AVE #2	13 STREET ADDRESS	620 N.E. 9th Avenue #1
CITY - ST - ZIP	FT. LAUDERDALE FL	14 CITY - ST - ZIP	Ft. Lauderdale, FL 33304
TITLE	VD	21 TITLE	Vice President VD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	UCHIN, CAROL	22 NAME	Dana Adler
STREET ADDRESS	620 NE 9TH AVE #6	23 STREET ADDRESS	620 N.E. 9th Avenue #5
CITY - ST - ZIP	FT. LAUDERDALE FL	24 CITY - ST - ZIP	Ft. Lauderdale, FL 33304
TITLE	STD	31 TITLE	Secretary/Treasurer STD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ANDERSON, SANDY	32 NAME	Nancy Brusher
STREET ADDRESS	620 NE 9TH AVE #1	33 STREET ADDRESS	620 N.E. 9th Avenue #8
CITY - ST - ZIP	FT LAUDERDALE FL	34 CITY - ST - ZIP	Ft. Lauderdale, FL 33304
TITLE		41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY - ST - ZIP		44 CITY - ST - ZIP	
TITLE		51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY - ST - ZIP		54 CITY - ST - ZIP	
TITLE		61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY - ST - ZIP		64 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Dana Adler* (DATE) **4/07/95**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DANA ADLER