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Jul 16 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N24348** (7)

1. Corporation Name

THE CORNELL CLUB OF THE GOLD COAST INC.



Principal Place of Business	Mailing Address
LAWRENCE, BARBARA 1401 NE 9TH ST #3 FT LAUDERDALE FL 33304 US	LAWRENCE, BARBARA 1401 NE 9TH ST #3 FT LAUDERDALE FL 33304 US

2. Principal Place of Business	2a. Mailing Address
21 11900 BISCAYNE BLVD Suite, Apt. #, etc.	26 20609 NE 6 CT Suite, Apt. #, etc.
22 SUITE 501	27
City & State	City & State
23 MIAMI FL	28 MIAMI FL
Zip	Zip
24 33181	29 33179
Country	Country
25 USA	30 USA

3. Date Incorporated or Qualified	
01/13/1988	
4. FEI Number	Applied For
65-0037866	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
<input checked="" type="checkbox"/> Yes	
6. Election Campaign Financing	\$5.00 May Be Added to Fees
Trust Fund Contribution	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
7. Is this nonprofit corporation a homeowners association?	<input type="checkbox"/> Yes <input checked="" 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 checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent	
LAWRENCE, BARBARA 1401 NE 9TH ST #3 FT LAUDERDALE FL 33304	

10. Name and Address of New Registered Agent	
81 Name	DANA L. BLACK
82 Street Address (P.O. Box Number Is Not Acceptable)	20609 NE 6 CT
83	
84 City	MIAMI FL
85 Zip Code	33179

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 *Dana L. Black* DATE **4/30/98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input checked="" type="checkbox"/> DELETE	1.1 TITLE	PRESIDENT/DIRECTOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LAWRENCE, BARBARA	1.2 NAME	NICOLE B DELTORO
STREET ADDRESS	1401 NE 9TH, #3	1.3 STREET ADDRESS	302 LIBERTY CT
CITY-ST-ZIP	FT. LAUDERDALE FL	1.4 CITY-ST-ZIP	DEERFIELD BEACH FL 33442
TITLE	<input checked="" type="checkbox"/> DELETE	2.1 TITLE	TREASURER/DIRECTOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	OREIER, NANCY	2.2 NAME	DANA L. BLACK
STREET ADDRESS	1202 TERRYSTONE CT	2.3 STREET ADDRESS	20609 NE 6 CT
CITY-ST-ZIP	FT. LAUDERDALE FL	2.4 CITY-ST-ZIP	MIAMI FL 33179
TITLE	<input checked="" type="checkbox"/> DELETE	3.1 TITLE	DIRECTOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SEIBERT, JOHN	3.2 NAME	LYDIA HERRIMANN
STREET ADDRESS	2035 N.E. 31ST AVE.	3.3 STREET ADDRESS	8817 NW 75 CT
CITY-ST-ZIP	FT. LAUDERDALE FL	3.4 CITY-ST-ZIP	TAMARAC FL 33321
TITLE	<input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CLINTON, GERRY	4.2 NAME	
STREET ADDRESS	692 SW 8TH ST CIR 12	4.3 STREET ADDRESS	
CITY-ST-ZIP	800A RATON FL	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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, on an attachment with an address.

SIGNATURE *Dana L. Black* DATE **4/30/98**

CR2E037 (10/97)