FILE NOW: FILING FEE AFTER MAY 1 IS [redacted]5.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY -1 PM 12:19

DOCUMENT # N30972 (6)

1. Corporation Name

OLD CUTLER GROVES NORTH HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
C/O THOMAS RINGEL 6732 SW 139TH STREET MIAMI FL 33158	C/O THOMAS RINGEL 6732 SW 139TH STREET MIAMI FL 33158

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/03/1989
3a. Date of Last Report: 05/01/1994
4. FEI Number: 65-0150012 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 c/o Susan Mitchell	26 c/o Susan Mitchell
Suite, Apt. #, etc. 22 6731 S. W. 138 Street	Suite, Apt. #, etc. 27 6731 S. W. 138 St.
City & State 23 Miami, FL	City & State 28 Miami, FL
Zip / Country 24 33158 25 USA	Zip / Country 29 33158 30 USA

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. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
RINGEL, THOMAS 6732 SW 139TH STREET MIAMI FL 33158	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 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	V	11 TITLE	S	☒ Change ☐ Addition
NAME	SPARROW, JACKIE	12 NAME	Deanna Kline	
STREET ADDRESS	13851 SW 67 CT	13 STREET ADDRESS	13851 S. W. 67 Court	
CITY-ST-ZIP	MIAMI FL	14 CITY-ST-ZIP	Miami, FL 33158	
TITLE	P	21 TITLE	P	☒ Change ☐ Addition
NAME	LEVINE, SANDY	22 NAME	Lori Foley	
STREET ADDRESS	13838 SW 67 PL	23 STREET ADDRESS	6724 S. W. 139 Street	
CITY-ST-ZIP	MIAMI FL	24 CITY-ST-ZIP	Miami, FL 33158	
TITLE	D	31 TITLE		☐ Change ☐ Addition
NAME	STARK, STEVE	32 NAME		
STREET ADDRESS	6753 S.W. 138TH STREET	33 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	34 CITY-ST-ZIP		
TITLE	T	41 TITLE		☐ Change ☐ Addition
NAME	MITCHELL, SUSAN	42 NAME		
STREET ADDRESS	6731 SW 138TH STREET	43 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	44 CITY-ST-ZIP		
TITLE	D	51 TITLE		☐ Change ☐ Addition
NAME	MITCHELL, FRANK	52 NAME		
STREET ADDRESS	6731 SW 138TH STREET	53 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	54 CITY-ST-ZIP		
TITLE	D	61 TITLE		☐ Change ☐ Addition
NAME	SCHILLING, I E	62 NAME		
STREET ADDRESS	6712 SW 139TH STREET	63 STREET ADDRESS	REMITTED BY MAY 1	
CITY-ST-ZIP	MIAMI FL	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 119.07(3)(k), 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: Susan E. Mitchell Susan E. Mitchell, Treas. 4-20-95 (305)233-8187
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0000611