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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE **Sandra B. Mortham**

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

N39736

(6)

Apr 29 1998 8:00am
Secretary of State

FILED

•	POINTE ESTATES HOMEO	WNERS' ASSOCIATION	N. INC		
Principal Plac	e of Business	Mailing Address		i totalital and cuite ideal fanns kitte Brit	aldti bibii bibii bibil bibit bibit bibii tabi
P.O. BOX 5132 OAKLAND PARK FL 33310 P.O. BOX 5132 OAKLAND PARK FL 33310			0	3. Date Incorporated or Qualified 08/30/1990 4. FEI Number	Applied For
2. Principal P	lace of Business	2a. Malling Address		65-0256035	Not Applicable \$8.75 Additional
21		26		5. Certificate of Status Desired L	Fee Required
Suite, Apt. #, etc. Suite		Suite, Apt. #, etc.		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
City & Stat	е	City & State		7. Is this nonprofit corporation a home	
23		28	1	S 2 y	
Zip 24	Country 26	Z ip	Country 30	6. This corporation owes or has paid to	
24	9. Name and Address of Curre		[30]	Personal Property Tax due June 30 10. Name and Address of New Regis	
		T	81	:	
PETER (3. HERMAN		82	odd S. Payne, Esq. Eberskyd Payne, L 850 Hollywood Blvd.	
	VER, 28TH FLOOR			Eberskyd Payne i L	. LP
110 SE			83 3	850 Hollywood Blvd.	SUITE 204
1 71.00	DERDALE FL 33301		84 H	ollywood,	FL 33021,1
11. Pursuant	to the provisions of Sections 617.05	02 and 617.1508, Florida Statu	1 1	-	
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, appropriate oblightions of, Section 617.0503, Florida Statutes.					
SIGNATURE	- Short	2		•	4/22/98
12,	Signature, typed or printed named register (c)	gent and this if applicable. (NOT ND DIRECTORS	TE: Registered Agent signature r	required when reinstating) ADDITIONS/CHANGES TO OFFICER	DATE
TITLE	P	DELETE	1.1 TITLE	PD	Change Addition
NAME	NANCY BUTZKY		1.2 NAME		
STREET ADDRESS	3237 NW 22 AVE		1.3 STREET ADDRESS	Nancy Butzky 3237 NW 22 Avenue	
CITY+ST-ZIP	OAKLAND PARK FL			V-11 1 D1, Lt 33000	
TITLE			1.4 CITY-ST-ZIP	Oakland Park, FL 33009	
I I'ILLE	Ţ	☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	D	Change Addition
NAME	T KRONGELB, DAVID	☐ DELETE	2.1 TITLE 2.2 NAME	D	Change Addition
NAME STREET ADDRESS	3247 N.W. 22 AVE.	☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	D David Krongelb 3247 NW 22 Avenue	Change Addition
NAME STREET ADDRESS CITY-ST-ZIP	3247 N.W. 22 AVE. OAKLAND PARK FL		2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-2IP	D David Krongelb 3247 NW 22 Avenue Oakland Park, FL 33009	
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NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	3247 N.W. 22 AVE. OAKLAND PARK FL TD TAYLOR, JOHN		21 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	D David Krongelb 3247 NW 22 Avenue Oakland Park, FL 33009 D MARIO Puccio 3274 NW 22 AVENUE	Vehange -
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NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	3247 N.W. 22 AVE. OAKLAND PARK FL TD TAYLOR, JOHN 5249 N.W. 22 AVE. OAKLAND PARK FL S SPITZMILLER, AUDREY 3251 N.W. 22 AVE.	☐ DELETE	21 TITLE 22 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE	D David Krongelb 3247 NW 22 Avenue Oakland Park, FL 33009 D MARIO PUCCIO 3274 NW 22 AVENUE OAKland Park, Fl 3330 SD D Audrey Spitzmiller 3255 NW 22 Avenue	√ehange -
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I hereby certify that the information supplied with this filling 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 on the received property of the corporation of t

SIGNATURE:

Welley 49 Your HIE

2-17-98

954-484-6065

CR2E037 (10/97)