FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Mar 03 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

Principal Place of Business

N41990

(5)

Mailing Address

ELDORADO COUNTRY CLUB TOWERS SOUTH ASSOCIATION, INC.

appears in Block 12 or Block 13 if changed, or on an attachment with an address.

		141 NE 10TH AVE. HALLANDALE FL 33009-4467		:			
					3. Date Incorporated or Qualified 02/06/1991	3a. Date of Last Report 02/27/1996	
Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For	
21		26			59-1165058	Not Applicable	
Suite, Apt. :		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be		
23		Zip Country		Trust Fund Contribution Added to Fees			
Žip	Country	<u> </u>		ıry	8. This corporation has liability for i	ntangible tax under s. 199.032, Yes No	
24	25 29 9. Name and Address of Current Registered Agent		30		10. Name and Address of New Re		
					81 Name		
POLIAKOFF, GARY A.							
EMERALD LAKE CORPORATE PARK			'	Street A	Address (P.O. Box Number is Not Acceptab	le)	
3111 STIRLING RD.				13	······································		
FT. LAUDERDALE FL 33312					· · · · · · · · · · · · · · · · · · ·		
TI. BADDENDALE TE GOOTE				City	: 5.	FL 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 617.0503, Florida Statutes.							
SIGNATURE Signature typed or printed harve of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) DATE							
12.	OFFICERS AND		13.	Agent signature	ADDITIONS/CHANGES TO OFFIC		
TITLE	DP OFFICE AND	DELETE	1.1 7071	F T	D 1 400	Change Addition	
NAME	MONACO, DANIEL		1.2 NAA		William Ahrendts 141NE 10B AU 4 Hallandele, FL 3	10	
STREET ADDRESS	141 NE 10TH AVE #24A			EET ADORESS	IVILLE IOTS AN A	+25A	
	HALLANDALE FL 3300 9			-ST-ZIP	Hallandole El 3	12009	
CITY-\$1-ZIP TITLE	DV	☐ DELETE	2.1 TITL		MATINIANIE, PR 3	Change Addition	
NAME	BOISVERT, MARTIAL		2.2 NAM	i			
STREET ADDRESS	141 NE 10TH AVE #20B			EET ADDRESS			
CITY - ST - ZIP	HALLANDALE FL 33009			Y-ST-ZIP			
TITLE	DS	DELETE	3.1 TITL			Change Addition	
NAME	ODDI, MARIE C.	_	3.2 NAM		.₽¥	- La binarigo Las roditions	
STREET ADDRESS	141 NE 10TH AVE #26C		3.3 STR	EET ADDRESS		•	
CITY-ST-ZIP	HALLANDALE FL 33009	}	3.4. CIT	Y-ST-ZIP			
TITLE	DT	☐ DELETE	4.1 TITE			☐ Change ☐ Addition	
NAME	LA FLAMME, MARGE		4. 2 NA	ME .			
STREET ADDRESS	141 NE 10TH AVE #18B		4.3 STR	EET ADDRESS			
City-St-ZiP	HALLANDALE FL 33009	î	4.4 CIT	-ST-ZIP	•		
TITLE	DIN CAR.	DELETE	5.1 TITU	E		Change Addition	
NAME	TA La Rochelle		5.2 NA	Æ .			
STREET ADDRESS	141 NE 103 AU	#30B	5.3 STR	EET ADDRESS			
CITY - ST - ZIP	Director J.A. La Rochelle 141 NE 103 AO Hallandale FL	3 300 9	5.4 CIT	r-ST-ZIP			
TITLE	Gerard Pullion	DING DELETE	6.1 TITE			Change Addition	
NAME			6.2 NA	AE			
STREET ADDRESS	141 NE 103 AU		6.3 STF	EET ADDRESS			
CHY-ST-ZIP	Hallandale, FL ?	33009	6.4 CIT	r-St-ZIP			
14. I do 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							

SIGNATURE: Duil G Why a CO DANYEZ G MUNACO PRES - 2-17-97 454 4561881