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Jan 15 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT **1998**

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

DOCUMENT # **N48684** (7)

1. Corporation Name

LAUDERDALE OAKS CONDOMINIUM XVI, INC.

Principal Place of Business	Mailing Address
2900 N.W. 46TH AVENUE LAUDERDALE LAKES FL 33313	2900 N.W. 46TH AVENUE LAUDERDALE LAKES FL 33313

3. Date Incorporated or Qualified: 05/04/1992

4. FEI Number: 59-1374644 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address	5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
21	26		
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	6. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees
City & State 23	City & State 28	7. Is this nonprofit corporation a homeowners association? ☑ Yes ☐ No	
Zip 24 / Country 25	Zip 29 / Country 30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☑ No	

9. Name and Address of Current Registered Agent

CAPRIO, DOC
2900 N.W. 46TH AVENUE
LAUDERDALE LAKES FL 33313

10. Name and Address of New Registered Agent

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 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: Doc Caprio — DATE: 1/7/98
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	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	GOLDFEDER, SAMUEL		1.2 NAME		
STREET ADDRESS	2900 N.W. 46TH AVENUE		1.3 STREET ADDRESS		
CITY-ST-ZIP	LAUDERDALE LAKES FL		1.4 CITY-ST-ZIP		
TITLE	PD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	CAPRIO, DOC		2.2 NAME		
STREET ADDRESS	2900 N.W. 46TH AVE.		2.3 STREET ADDRESS		
CITY-ST-ZIP	LAUDERDALE LAKES FL		2.4 CITY-ST-ZIP		
TITLE	SD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	PASHKIN, ELAINE		3.2 NAME		
STREET ADDRESS	2900 N.W. 46TH AVENUE		3.3 STREET ADDRESS		
CITY-ST-ZIP	LAUDERDALE LAKES FL		3.4 CITY-ST-ZIP		
TITLE	TD	☑ DELETE	4.1 TITLE	TD	☑ Change ☑ Addition
NAME	NORMAND, MARC		4.2 NAME	SONDRA SCHANTZ	
STREET ADDRESS	2900 N.W. 46TH AVENUE		4.3 STREET ADDRESS	2900 N.W. 46TH AVENUE	
CITY-ST-ZIP	LAUDERDALE LAKES FL		4.4 CITY-ST-ZIP	LAUDERDALE LAKES FL	
TITLE	VP	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	PACETTI, JACK		5.2 NAME		
STREET ADDRESS	2900 N.W. 46TH AVE.		5.3 STREET ADDRESS		
CITY-ST-ZIP	LAUDERDALE LAKES FL		5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (10/97)

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, or on an attachment with an address.

SIGNATURE: Doc Caprio — DOC CAPRIO — 1/7/98 — 954-735-3962
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

FEE RECEIVED