FILE NOW: FILING FEE IS \$61.25

Mailing Address

900 PERRINE AVE.

NONPROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

900 PERRINE AVE.



Sandra B. Mortham

FILED

Feb 16 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N9300000629 (6)

Willyn

SIGNATURE:

PERRINE/CUTLER RIDGE COUNCIL, INC.

900 PERRINE AVE. MIAMI FL 33157 US		900 PERRINE AVE. Miami Fl 33157 US				3. Date Incorporated or Qualified			
						02/15/1993			
1**		•				4. FEI Number	<u> </u>	pplied For	
						65-0407832		lot Applicable	
2. Principal P	lace of Business	2a. Mailing Address				5. Certificate of Status Desired	-	Additional leguired	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				6. Election Campaign Financing		May Be	
22		27				Trust Fund Contribution Added to Fees			
City & State		City & State				7. Is this nonprofit corporation a homeowners association?			
Zip	Country	28	Cou	nin					
24	25	29	30			6. This corporation owes or has paid the currer Personal Property Tax due June 30.		∏ No	
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent			
				61	Name				
CRANMAN, STEVEN J.				82	Street Add	Address (P.O. Box Number is Not Acceptable)			
	IRINE AVE. E FL 33157			83		· · · · · · · · · · · · · · · · · · ·			
PERMITE	: FL 33137			84					
				1	City	FL		Code	
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 register office or registered agont, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registere agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.									
SIGNATURE Steven J. Cranman Executive Director Signature, typed or printed name of registered agent and title if typicable (NOTE Registered Agent aignature regulied when reinstating) DATE									
12.	OFFICERS AND		13.	J AGE	t algricatore requir	ADDITIONS/CHANGES TO OFFICERS AND D	IRECTO	RS IN 12	
TITLE	D	☐ DELETE	1.1 [1]	TLE	T(C		Change	Addition	
NAME	HEACOCK, DENISE		1,2 NA	AME	61	underson, heif		•	
STREET ADDRESS	9707 E. HIBISCUS STREET		1.3 \$1	REET #	ADDRESS 17	945 Franjo Koau			
CITY-ST-ZIP	MIAMI FL 33157		1.4 00	TY-ST	- ZIP M	liaming FL 33157			
TITLE	CO-C	DELETE	2.1 TIT	TLE	T D		Change	Addition	
NAME	CADMAN, GEORGE I		2.2 NA	ME	B	roup, Bill			
STREET ADDRESS	15757 S. DIXIE HWY.		2351	REET A	ADORESS 84	10 Perrine Avenue			
CITY-SY-ZIP			2.4 C	1TY-S1	I-ZIP M	liami, FL 33157	,		
TITLE	D	 -		ILE	(7)	· · · · · · · · · · · · · · · · · · ·	Change	Addition	
NAME	COLLINS, MARY		3.2 NAME		76	efferson, Ron 5505 S. Dirie Hwy., #899			
STREET ADDRESS	18021 SW 91ST AVE.		3.3 STRE			11/2015 S. D. 11 33189			
CITY-ST-ZIP TITLE	MIAMI FL.	DELETE	3.4. C DELETE 4.1 TO		D D	7100	Change	Addition	
NAME	Dotson, Albert S		4.2 N/			odovici, Susan) Oldingo	_producti	
STREET ADDRESS	17901 SW 78TH AVE.		1		ODRESS 1	7415 S. Divie Hwy.			
CITY-ST-ZIP	MIAMI FL.		4.4 CITY-		-ZIP	iami, FL 33157			
TITLE	ST	DELETE 5.1			D) L	Change	Addition	
NAME	BELL, WILBUR		5.2 NA	ME	M	1830, Joyce Avenue, Rd.			
STREET ADDRESS	17452 SW 104TH AVE.		5.3 ST	REET A		*			
CITY+ST-ZIP			5.4 CI	TY-ST	-ZIP M	liami, FL 33157			
TITLE	D	☐ DELETE	6.1 (1)		173	ell, Charles	Change	Modition	
NAME	HANNA, ED		6.2 NAME		150	120 SW 184 Lane			

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.