

**FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # N93000002464 (6)

1. Corporation Name

THE DIPLOMAT GOLF & RACQUET CLUB CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

Mailing Address

26 DIPLOMAT PARKWAY  
HALLANDALE FL 33009

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HALLANDALE FL 33009

3. Date Incorporated or Qualified  
05/25/1993

3a. Date of Last Report  
08/03/1995

2. Principal Place of Business

2a. Mailing Address

4. FEI Number  
65-0406100

Applied For  
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

City & State

City & State

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

Zip

Country

Zip

Country

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

~~ROBERTS, MCINT. & REALTY  
1840 NE 153RD STREET  
NORTH MIAMI BEACH FL 33162~~

81 Name STEPHEN J. STRINLEY, P.A. OK.  
82 Street Address (P.O. Box Number is Not Acceptable) 3990 SHERIDAN ST. SG  
83 SUITE 109  
84 City HOLLYWOOD FL FL 85 Zip Code 33021

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.

4-25-96

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent Signature Required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	X PD	<input checked="" type="checkbox"/> DELETE
NAME	X POREK, PAUL	
STREET ADDRESS	X 226 S.E. 1ST STREET	
CITY-ST-ZIP	X MIAMI FL	
TITLE	X VD	<input checked="" type="checkbox"/> DELETE
NAME	X SANDER, LEONARD	
STREET ADDRESS	X 1151 ATLANTIC SHORES	
CITY-ST-ZIP	X HALLANDALE FL	
TITLE	X SROK	<input checked="" type="checkbox"/> DELETE
NAME	X BOK, JOHN	
STREET ADDRESS	X 3400 N.E. 192 ST #492	
CITY-ST-ZIP	X NORTH MIAMI BEACH FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.1 TITLE	PD
1.2 NAME	Roman, Margarita
1.3 STREET ADDRESS	26 Diplomat Pkwy.
1.4 CITY-ST-ZIP	Hallandale, FL 33309
2.1 TITLE	VD
2.2 NAME	Altorjay, Eva
2.3 STREET ADDRESS	2100 S. Ocean Lane #2409
2.4 CITY-ST-ZIP	Fort Lauderdale, FL 33316
3.1 TITLE	Td
3.2 NAME	Alvarez, Luis
3.3 STREET ADDRESS	1530 SW 86th Ct.
3.4 CITY-ST-ZIP	Miami, FL 33144
4.1 TITLE	Sp
4.2 NAME	Scott, Antoinette
4.3 STREET ADDRESS	2342 SW 17th Street
4.4 CITY-ST-ZIP	Miami, FL 33145
5.1 TITLE	
5.2 NAME	Diaz, Dr. Adalberto R.
5.3 STREET ADDRESS	210 W. Ventura
5.4 CITY-ST-ZIP	Clewiston, FL 33440
6.1 TITLE	20000187236
6.2 NAME	-06/24/96--01015--008
6.3 STREET ADDRESS	***61.25
6.4 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: Margarita Roman 2/26/96 305-947-3999  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day/Time Phone #  
Margarita Roman 2/26/96 305-4534-5001

CR2E037 (12/95)