FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

N9400001465 (3)

LONGWOOD HOUSE CONDOMINIUM ASSOCIATION INC.

FILED Jul 21 1997 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address			1 10011101 010 1011 01011 00111 00111			
11685 CANAL DRIVE N. MIAMI FL 33181		11685 CANAL DRIVE N. MIAMI FL 33181-325	7					
I II. MIRMI IL 55	7101	II. WITHIN TE COTOT GEO	,		3. Date Incorporated or Qualified 03/24/1994	3a. Date of Las 05/01/		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	<u> </u>	Applied For	
21		26			59-1453404 Not Applicable			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	× \$8.7	5 Additional	
22		27			6. Certificate of Status Desired	Fee	Required	
City & State		City & State			6. Election Campaign Financing)0 May Be	
23		28			Trust Fund Contribution	Adde	ed to Fees	
Zip	Country	Zip	Count	У	8. This corporation has tiability for	ntangible tax unde	r s. 199.032,	
24	25	29	30			Yes X No		
	9. Name and Address of Cu	ntaut Hedistered Whent	8	Name	10. Name and Address of New Re	Alsreien Ageur		
			ا ا	1	Mark Shaw			
	EIN, HARVEY		8:	Street.	Address (P.O. Box Number is Not Acceptab	ie #30	2	
	ANAL DRIVE		8:		11685 CANAL Pri	1e 430.	<u> </u>	
N. MIAM	I FL 33181		"	1				
			8	City	N MiAmi	85 2	ig Code	
dd Duna	Name of Continuous Con	0000 017 4000 50 04				FL °° '	3318/	
office or r	egistered agent, or both in the S	State of Florida. Such change w	atules, the abb as authorized b	ye-named y the con	I corporation submits this statement for the p poration's board of directors. I hereby accep	ot the appointment	as registered	
agent. I a			, Florida Statute	es.	·	3/6/97	_	
SIGNATURE .	X May Jun		Note of the		e required when reinslating)	3/6/97		
12.	Strigture, typed or printed name of registers OFFICERS	S AND DIRECTORS	13.	gent signature	ADDITIONS/CHANGES TO OFFIC		OBS IN 12	
TITLE	D	DELETE	1.1 TITLE		D/P	Chang		
NAME	BERNSTEIN, HARVEY	_	1.2 NAME		SHAW, MACK		, <u> </u>	
STREET ADDRESS	11685 CANAL DRIVE			T ADDRESS	11685 CANAL Drive			
CITY-ST-ZIP	N. MIAMI FL 33181		1.4 CITY-		N MiAMI FC 33181			
TITLE	D	DELETE	2.1 TITLE	D1 +11		☐ Chang	e Addition	
NAME	NEWMAN, FRANK		2.2 NAME				_	
STREET ADDRESS	11685 CANAL DRIVE		2.3 STREE	T ADDRESS				
CITY-ST-ZIP	N. MIAMI FL 33181		2.4 CITY					
TITLE	D	DELETE	3 1 TITLE	<u> </u>	D	Chang	e 🔀 Addition	
NAME	BERGSTROM, RUSSELL	•	3.2 NAME		BLASE, ANN			
STREET ADDRESS	11685 CANAL DRIVE		3.3 STREE	T ADDRESS	11685 DANAL Brive			
CITY-ST-ZIP	N. MIAMI FL 33181		3.4. CITY	ST-ZIP	N MiAm: FL 33B1		Ì	
TITLE	111 1111 1111 1 2 20 10 1	DELETE	4 1 TITLE		D	☐ Chang	je 🔀 Addition	
NAME			4. 2 NAM	Ē	HAYris ADDIE 11085 CANAL DRIVE		,	
STREET ADDRESS			4.3 STREE	T ADDRESS	11685 CANAL DRIVE		ſ	
CITY-ST-ZIP			4.4 CITY-	ST-ZIP	N. MIAM: FC 33181	1		
TITLE		☐ DELE1E	5.1 TITLE			☐ Chang	je 🔲 Addition	
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREE	I ADDRESS				
CITY-S1-ZIP			5.4 CiTy -	ST-ZIP				
TITLE		DELETE	6.1 TITLE			☐ Chang	je 🔲 Addition	
NAME			6.2 NAME					
STREET ADDRESS			63 STREE	T AODRESS			Ì	
CITY-ST-ZIP			6.4 CITY-	ST-ZIP				
	ov certify that the information suc	plied with this filing does not qu			stated in Section 119.07(3)(i), Florida Statutes If that my signature shall have the same lega	s. I further certify th	at the	

a foo nereby certify that the information supplied with rins filling open for query for the exemption stated in Section 119.7(5)(f), Florida Statutes. Further certify that the information indicated on this should report on the properties 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 of Block 13 if changed, or organ attachment with an address.

SIGNATURE:

a quille

5/6/87