

FILED
May 05, 1999 8:00 am
Secretary of State

05-05-1999 90082 003 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N94000001974

1. Corporation Name:

CONCERNED CITIZENS OF HOLIDAY LAKE APARTMENTS, I NC.

 Principal Place of Business
 733 N. POWERLINE ROAD
 POMPANO BEACH FL 33069

 Mailing Address
 733 N. POWERLINE ROAD
 POMPANO BEACH FL 33069


2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	3. Date Incorporated or Qualified 04/18/1994 4. FEI Number 65-0495296 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
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9. Name and Address of Current Registered Agent LOVE, LELA MAE 814 N POWERLINE RD 8 POMPANO BEACH FL 33069	10. Name and Address of New Registered Agent 81 Name Veronica Blackman 82 Street Address (P.O. Box Number is Not Acceptable) 719 N Powerline Rd 83 84 City Pompano Beach FL 85 Zip Code 33069
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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 *Veronica Blackman*
 Signature, typed or printed name of registered agent and title if applicable.

4/27/99

(NOTE: Registered Agent signature required when reappointing)

DATE

OFFICERS AND DIRECTORS**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

OFFICERS AND DIRECTORS		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	PRESIDENT - D ☒ Change ☐ Addition
NAME	LOVE, LELA MEA	1.2 NAME	Veronica Blackman
STREET ADDRESS	611 N. POWERLINE RD.	1.3 STREET ADDRESS	719 North Powerline Rd
CITY-ST-ZIP	POMPANO BEACH FL 33069	1.4 CITY-ST-ZIP	Pompano Bch FL 33069
TITLE	VD	2.1 TITLE	Vice President - D ☐ Change ☒ Addition
NAME	BROWN, DAVID	2.2 NAME	Bernice Roberson
STREET ADDRESS	937 N POWERLINE RD	2.3 STREET ADDRESS	895 N. Powerline Rd
CITY-ST-ZIP	POM BCH FL 33069	2.4 CITY-ST-ZIP	Pompano Bch FL 33069
TITLE	VD	3.1 TITLE	TREASURER - D ☐ Change ☒ Addition
NAME	THOMAS, V	3.2 NAME	Claudia Akin
STREET ADDRESS	701 NORTH POWERLINE RD.	3.3 STREET ADDRESS	915 N. Powerline Rd
CITY-ST-ZIP	POMPANO BEACH FL 33069	3.4 CITY-ST-ZIP	Pompano Bch FL 33069
TITLE	SD	4.1 TITLE	SECRETARY (ACTING) - D ☐ Change ☒ Addition
NAME	GREENE, DEBBIE	4.2 NAME	LATOYA CASSETT
STREET ADDRESS	779 N POWERLINE RD	4.3 STREET ADDRESS	901 N Powerline Rd
CITY-ST-ZIP	POMPANO BCH FL 33069	4.4 CITY-ST-ZIP	Pompano Beach FL 33069
TITLE	TD	5.1 TITLE	BOARD MEMBER - D ☐ Change ☒ Addition
NAME	ABRAMS, CLEVELAND	5.2 NAME	CYNTHA JOHNSON
STREET ADDRESS	685 N POWERLINE RD	5.3 STREET ADDRESS	853 N. POWERLINE RD
CITY-ST-ZIP	POMPANO BCH FL 33069	5.4 CITY-ST-ZIP	Pompano Beach FL 33069
TITLE		6.1 TITLE	BOARD MEMBER - D ☒ Change ☐ Addition
NAME		6.2 NAME	LELA MAE LOVE
STREET ADDRESS		6.3 STREET ADDRESS	814 N Powerline Rd
CITY-ST-ZIP		6.4 CITY-ST-ZIP	Pompano Beach FL 33069

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, with all other like empowered.

 SIGNATURE: *Veronica Blackman Pres*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-27-99

Daytime Phone #

CR2E037 (11/98)

PAGE 2

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POMPANO BEACH FL 33069

Mailing Address

733 N. POWERLINE ROAD
POMPANO BEACH FL 33069

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		04/18/1994	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		65-0495296	
City & State		City & State		Applied For	
23		28		Not Applicable	
Zip		Zip		5. Certificate of Status Desired	
24		29		Country	
25		30		☐ \$8.75 Additional Fee Required ☐ \$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent

LOVE, LELA MAE
614 N POWERLINE RD
8
POMPANO BEACH FL 33069

10. Name and Address of New Registered Agent

81 Name Veronica Blackman
82 Street Address (P.O. Box Number is Not Acceptable)
719 N Powerline Rd
83
84 City Pompano Beach FL 85 Zip Code 33069

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 Veronica Blackman

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

(NOTE: Registered Agent signature required when removing)

DATE

4/27/99

12. OFFICERS AND DIRECTORS

TITLE	PD	DELETE
NAME	LOVE, LELA MAE	
STREET ADDRESS	611 N. POWERLINE RD.	
CITY-ST-ZIP	POMPANO BEACH FL 33069	
TITLE	VD	DELETE
NAME	BROWN, DAVID	
STREET ADDRESS	937 N POWERLINE RD	
CITY-ST-ZIP	POM BCH FL 33069	
TITLE	VD	DELETE
NAME	THOMAS, V	
STREET ADDRESS	701 NORTH POWERLINE RD.	
CITY-ST-ZIP	POMPANO BEACH FL 33069	
TITLE	SD	DELETE
NAME	GREENE, DEBBIE	
STREET ADDRESS	779 N POWERLINE RD	
CITY-ST-ZIP	POMPANO BCH FL 33069	
TITLE	TD	DELETE
NAME	ABRAMS, CLEVELAND	
STREET ADDRESS	695 N POWERLINE RD	
CITY-ST-ZIP	POMPANO BCH FL 33069	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	BOARD MEMBER	Change	Addition
1.2 NAME	CLEVELAND ABRAMS		
1.3 STREET ADDRESS	695 N POWERLINE RD		
1.4 CITY-ST-ZIP	POMPANO BEACH FL 33069		
2.1 TITLE		Change	Addition
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE		Change	Addition
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE		Change	Addition
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		Change	Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		Change	Addition
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

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, with all other like empowered.

SIGNATURE: Veronica Blackman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-27-99

Date

Daytime Phone #

454-968-1013

CR2E037 (11/98)