FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



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

1996

N9400002369 (6) DOCUMENT #
1. Corporation Name

SIERRA RIDGE CONDOMINIUM D ASSOCIATION, INC.

	···									
Principal Place	of Business	Mailing Address				***************************************	••••••••			
80 S.W. 8TH	ST.	80 S.W. 8TH ST.	SUITE 2800							
SUITE 2800	120	SUITE 2800 MIAMI FL 33130								
MIAMI FL 331	130	MIAMI FL 33130				3. Date Incorporated or Qualified 05/11/1994		e of Las)2/21/	t Report 1995	
2. Principa! Pla	ace of Business	2a. Mailing Address				4. FEI Number	•		Applied For	
21		26				65-0513727			Not Applicable	
Suite, Apt. a	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			5 Additional Required	
City & State)	City & State	City & State			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
Zip	Country	Zip				8. This corporation has liability for intangible tax under s. 199.032,			•	
24	25	29	30			Florida Statutes				
	9. Name and Address of Curr	ent Registered Agent				10. Name and Address of New R	egistered A	gent		
				81	Name					
WENZEL INVESTMENT COMPANY				82 Street Address (P.O. Box Number is Not.			e)			
	ETER WENZEL									
	8TH ST., SUITE 2800			83						
MIAMI F	L 33130			84	City			85 Z	ip Code	
							<u>FL</u>	<u> </u>		
or register	to the provisions of Sections 617.05 red agent, or both, in the State of Fik th, and accept the obligations of, Se	orida. Such change was authori.	ized by th	e corp	named co oration's	propriation submits this statement for the pur board of directors. I hereby accept the appoint	pose of char intment as r	nging its registere	registered office d agent. I am	
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable. (N	NOTE: Registe	ered Ager	nt signature re	equired when reinstating)	DATE			
12.		ND DIRECTORS	1:			ADDITIONS/CHANGES TO OFF	CERS AND	DIRECT	ORS IN 12	
TITLE	PD	DELETE	1.1	1 TITLE				Change	Addition	
NAME	Wenzel, Peter		1.2	2 NAME						
STREET ADDRESS	80 S.W. 8TH ST., SUITE 28	300	1.3	3 STREET	ADDRESS					
CITY - ST - ZIP	MIAMI FL 33130		1.4	1.4 CITY-ST-ZIP				4		
TATLE	VD DELETE		2.1 TITLE				Ĺ] Change	■ Addition	
NAME	MACHADO, MARCOS A			2 NAME						
STREET ADDRESS	280 S.W. 8TH ST.				ADDRESS					
CITY-ST-7IP	MIAMI FL 33130	DELETE		4 CITY - 1 TITLE	ST-ZIP) Change	Addition	
TILE NAME	STD DELETE FERRAZ, EDUARDO A			2 NAME			L] Unaligo		
STREET ADDRESS	80 S.W. 8TH ST., SUITE 28	tan			ADDRESS					
CITY - ST - ZIP	MIAMI FL 33130	,00		4 CITY-						
TiTLE	/m am 1 & 90 100	DELETE		1 TITLE				Change	☐ Addition	
NAME			4.	2 NAME						
STHEFT ADDRESS			4.3	3 STREET	ADDRESS					
CITY-ST-ZIP			4.4	4 CITY - S	1-21P					
TITLE		DELETE	5.	1 TITLE			Ĺ] Change	Addition Addition	
NAME			5	2 NAME						
STREET ADDRESS			5:	3 STREET	ADDRESS					
CITY - ST - ZIP		Fileson		4 CITY-5	T-ZIP			70		
TITLE		DELETE		1 TITLE			L] Change	☐ Addition	
NAME				2 NAME						
STHEET ADDRESS					ADDRESS					
CITY-ST-ZIP	y certify that the information supplie	d with this filing is voluntarily fur		4 City-S nd doe		Latify for the exemption stated in Section 119.	07(3)(k). Flor	ida Stati	ites. I further	
certify that	t the information indicated on this ar	nnual report or supplemental an poration or the receiver or trust	nual repo tea ampoy	rt is tru	ue and ac	curate and that my signature shall have the le this report as required by Chapter 617, Floring	same legal e	effect as	if made under	
	324.08	hulo P	esia	Jei	t	2/13/96 3	.05 545	: 2Ve	5	
SIGNAT	UNE:			_	_		11.	- 10		

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