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

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 29 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # N9400002826 (5)

THE FOUNTAINVIEW CLUB NO. 2 CONDOMINIUM ASSOCIAT ION, INC.

ION, INC.														
Principal Place of Business Mailing Address									i ipakking bib ibili qiqil qalil qdi	)	<u> </u>		100 1007	
2825 GRANADA BLVD.				2825 GRANADA BLVO.										
UNIT 2A				IIT 2A										
CORAL GABLES FL 33134				CORAL GABLES FL 33134-6365				3	3. Date Incorporated or Qualified	3a.	Date of La		ort	
									05/31/1994		01/24/	1996		
2. Principal Place of Business				2a. Mailing Address				4	4. FEI Number <b>59-6064793</b>			<del></del>	ed For	
21			26						38 0004783			<del></del>	pplicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.					5. Certificate of Status Desired			<b>75</b> Ado e Regu			
City & State			City & State				-	6. Election Campaign Financing			00 ма			
23			28					`	Trust Fund Contribution			ded to f		
Zip		Country		Zıp		Country	,	8	8. This corporation has liability for	or intang	ible tax und	er s. 19	99.032,	
24 25			29		30				Florida Statutes	Yes				
	9, Name	and Address of Curren	it Regis	stered Agent				10	0. Name and Address of New	Register	ed Agent			
	<b></b>					81	Name							
MUMM, ROGER V							Street A	ddress	(P.O. Box Number is Not Accept	able)				
2825 GRANADA BLVD.						83		<del>- · · ·</del>	<del>-</del>					
	T 2A	00404				63								
	ral Gables fl	. 33134				64	City			F	85	Zip Coo	de	
11. Pur	suant to the provis	ions of Sections 617.050	2 and 6	317.1508, Florid	la Statutes, ti	ne above	e-named o	corporat	ion submits this statement for the	nurnos	e of changir	ng its re	egistered	
offic age	e or registered ag nt. I am familiar w	gent, or both, in the State ith, and accept the obliga	of Flori ations o	ida. Such chang of, Section 617.0	ge was autho 0503, Florida	orized by Statutes	the corp s.	oration's	board of directors. I hereby acc	ept the	appointmen	l as reç	gistered	
SIGNAT	URE													
	Signature, typed	or printed name of registered age					nt signature r	required wh	nen reinstating)	DAT				
12.	P	OFFICERS AN	D DIRE	CTORS DE		13.	—-т		ADDITIONS/CHANGES TO OF	-ICERS /	AND DIRECT		N 12 Addition	
····		ROGER V.			ccit	1.2 NAME						ye L		
		ROGER V. RANADA BLVD 2A				1.3 STREET	*DODECC							
1		GABLES FL				14 CITY - S								
TITLE	V	OUDITO I E		☐ DEI		21 TITLE	1-21				☐ Chan	ige T	Addition	
NAME						22 NAME						_	_	
		RANADE BLVD 2B				2.3 STREET	ADDRESS							
		GABLES FL				2. 4 CITY - 9	ST-ZIP							
TITLE	VD			DEL		3.1 TITLE	1				Chan	ige [	Addition	
NAME		WILLIAM				3.2 NAME	l							
STREET AD		RANADA BLVD 3B				3.3 STREET	ADDRESS							
CITY-ST-Z		GABLES FL				3.4. CITY - S	ST - ZIP							
TITLE	SD			☐ DEI	LETE	4.1 TITLE					☐ Chan	ige [	Addition	
NAME		IARLOTTE			1	4. 2 NAME	ĺ							
STREET ADI		YANADA BLVD 1B				4.3 STREET	ADDRESS							
CITY-ST-Z		GABLES FL				4.4 CITY - S	T - 21P					r	A azert	
TITLE	VD VA	LE COMMONO		DE		5.1 TITLE					☐ Chan	ige L	Addition	
NAME		LE, FRANCISCO				5.2 NAME								
STREET ADI		RANADA BLVD 1A				5.3 STREET	- 1							
CITY-ST-Z	P CORAL O	GABLES FL		DEI		5.4 CITY - S	T-ZIP				Chan	nne	Addition	
TITLE	, . –	DOROTHY		<i>V</i> ci		6 1 TITLE					∐ Chan	iñe [		
NAME CTOFFT ADV		RENADE BLVD. 3A				6.2 NAME	ADDDECO							
STREET ADI		GABLES FL				6.3 STREET 6.4 CITY - S								
UIIT-57-7	r : VVNAL'	MADLE L				DRUIT-S	I OF							

I do 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 12 if changed for the national 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 12 if changed for the corporation or trustee empowered to execute this report as required by Chapter 617, Florida Statutes. I further certify that the information indicated on this 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 carries and that my name appears in Block 12 or Block 12 if changed for the carries and that my name appears in Block 12 or Block 12 if changed for the carries and the carries