


FILE NOW: FILING FEE IS \$61.25

FILED  
Aug 18 1997 8:00am  
Secretary of State

<b>NONPROFIT CORPORATION ANNUAL REPORT 1997</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # N95000003853 (7)**

1. Corporation Name

**VILLAGE OF LA MANCHA CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business	Mailing Address
3132 N PINE ISLAND ROAD SUNRISE FL 33351	3132 N PINE ISLAND ROAD SUNRISE FL 33351-7333

3. Date Incorporated or Qualified <b>08/14/1995</b>	3a. Date of Last Report <b>04/21/1996</b>
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2. Principal Place of Business	2a. Mailing Address	4. FEI Number <b>65-072542</b> <b>APPLIED FOR</b>	Applied For
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.		Not Applicable
22. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
24. Country	29. Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**EMERY, MICHAEL R**  
**4875 N FEDERAL HWY 7TH FLOOR**  
**FT LAUDERDALE FL 33308**

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	<b>FL</b>
	85. Zip Code

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>PD</b> <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>MILSSTEIN, TZVI</b>	1.2 NAME	
STREET ADDRESS	<b>3132 N PINE ISLAND ROAD</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>SUNRISE FL 33351</b>	1.4 CITY-ST-ZIP	
TITLE	<b>VD</b> <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>MILSSTEIN, MICHAL</b>	2.2 NAME	
STREET ADDRESS	<b>3132 N PINE ISLAND ROAD</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>SUNRISE FL 33351</b>	2.4 CITY-ST-ZIP	
TITLE	<b>STD</b> <input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>MILSSTEIN, MICHAEL</b>	3.2 NAME	<b>Milshtein, Michal</b>
STREET ADDRESS	<b>3132 N PINE ISLAND ROAD</b>	3.3 STREET ADDRESS	<b>3132 N Pine Island Road</b>
CITY-ST-ZIP	<b>SUNRISE FL 33351</b>	3.4 CITY-ST-ZIP	<b>Sunrise, FL 33351</b>
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 13 if changed, or on an attachment with an address.

CR2E037 (9/96)