FILE NOW: FILING FEE IS \$61.25

'NONPROFIT



FLORIDA DEPARTMENT OF STATE

ANNUA 1	PORATION AL REPORT 996	DIVISK	Sandra B. Mort Secretary of S ON OF CORPO	State				
OCUMENT # N9500004611 (8) NAUTICA SOUND HOMEOWNERS ASSOCIATION, INC.					1 (6.8 14.10) (1.10) (1.10) (1.10)			
rincipal Place o	of Business	Mailing Address			F HORISTON BLO 19101 BIND BEING BONG	r sain nam nasn asm ainia Brini (188) Itili (188)		
1401 UNIVERS		1401 UNIVERSI	TY DRIVE		ļ			
SUTIE 200 SUTIE 200 CORAL SPRINGS FL 33071-6019 CORAL SPRINGS FL 33071-6019					Day of last float			
				3. Date incorporated or Qualified 09/28/1995	3a. Date of Last Report			
Principal Co	ce of Business	2a. Mailing Addre	ese		4. FEI Number	Applied For		
	og og progrades	26 Mailing Addre				Not Applicable		
Suite, Apt. #	, etc.	Suite, Apt. #,	, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City P.C.		City & State			6. Election Campaign Financing	\$5.00 May Be		
City & State		28			Trust Fund Contribution	Added to Fees		
Zip	Country	Zip	<u> </u>	Country	This corporation has liability for in Florida Statutes	intangible tax under s. 199.032, Yes No		
]	25	29	30	L	Florida Statutes 10. Name and Address of New R			
	9. Name and Address of Cur	negistered Agent		81 Name	or Hen I			
	DERDALE FL 33301	X-0.0 and 647 (505)	a Stabilities	84 City	orporation submits this statement for the pur	FL 85 Zip Code urpose of changing its registered office		
or registere familiar with	ed agent, or both, in the State of the character of the configurations of State of the character of the char	Section 617.0503, Florida	Statutes.	gistered Agent signature n	con contribution tension	pointment as registered agent. Lam DATE FIGERS AND DIRECTORS IN 12		
2.	OFFICERS	S AND DIRECTORS	FIE	13. 11 TriLE	ADDITIONS/CHANGES TO OFF	FICERS AND DIRECTORS IN 12 Change Addition		
ITLE IAME STREET ADDRESS	PD COSTELLO, RICHARD A 1401 UNIVESITY DRIVE S	Suite 200	, <u>, , , , , , , , , , , , , , , , , , </u>	1.2 NAME 1.3 STREET ADDRESS	COSTELLO, RICHARD A	_ · _		
CITY - ST - ZIP	CORAL SPRINGS FL 330	071	LETE	1.4 CITY · ST - ZIP 2.1 TITLE		☐ Change ☐ Addition		
ITLE IAME	VD Fant, Alan	ıu		2 2 NAME				
ame Treet address	1401 UNIVESITY DRIVES	SUITE 200	1	2 3 STHEET ADDRESS				
TY-ST-ZIP	CORAL SPRINGS FL 330	071	LETE	2 4 CITY - ST - ZIP		Change Addition		
ITLE	STD	DE	tiblE	3 1 TITLE		El change El Add lie		
IAME	PORTNOY, LAWRENCE	SHITE SOO	1	3 2 NAME 3 3 STREET ADDRESS				
TREET ADDRESS	1401 UNIVESITY DRIVES	OUTE 200 171	1	3.3 STREET ADDRESS 3.4 City-St-Zip				
ITY-ST-ZIP ITLE	CORAL SPRINGS FL 330	UDF	ELETE	34 City-St-ZiP 41 TITLE	P	☐ Change 🔛 Addition		
itle Ame	1	۵۳	1	4 2 NAME	ARKIN, GARY	E OUTER AAC		
ame Treet address			, l	4 3 STREET ADDRESS				
ITY-ST-ZIP			Tiere	4.4 CITY - ST - ZIP	CORAL SPRINGS, FL 3	3307.1 Change Additio		
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AME			1	5 2 NAME 5 3 STREET ADDRESS				
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CITY - ST - ZIP			DELETÉ	5.4 CHY-ST-ZIP 6.1 TITLE	<u> </u>	49098 Additio		
TTLE NAME		Ĺ	١	6.2 NAME	8000018 -06/04/9601	016007		
ame Treet address			1	6.3 STREET ADDRESS		5-1-96		
THE MUNICIPA			i	64 CITY-ST-ZIP		2176		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 this 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 chapted, or on an attachment with an address.

SIGNATURE:

SIGNATURE

Bignature And Typeo or Printed Name of Signing Ornices on Director

Date

Date

Date

Date