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

NONPROFIT CORPORATION AMNUAL REPORT

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## **FILED** Jun 02 1998 8:00am FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State Secretary of State DIVISION OF CORPORATIONS

	1330	2110101101				
POCU Corporation	MENT # N9500	00004611 (8)				
NAUTIC	CA SOUND HOMEOWNERS	S ASSOCIATION, INC.				
						<b>                                    </b>
Principal Place of Business Mailing Address					T FORMAN OID INTO INTO BANK BANK BANK AND IN	
1401 UNIVERSITY DRIVE 1401 UNIVERSITY DRIVE					3. Date Incorporated or Qualified	
SUTIE 200		SUTIE 200 CORAL SPRINGS FL 33071-6019		09/28/1995		
CORAL SPRINGS FL 33071-6019		CORAL SPRINGS PL 330/1-6019		4. FEI Number	Applied For	
2. Principal Place of Business		2a. Mailing Address		65-0703947	Not Applicable	
21		26		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		6- Election Campaign Financing	\$5.00 May Be	
22 27			0.00		Trust Fund Contribution	Added to Fees
<del></del>		City & State			7. Is this nonprofit corporation a homeowners association?  X Yes  \text{No} No	
<b>23</b> Zip	Country	<b>28</b> Zip	Country	1	This corporation owes or has paid the	<del></del>
24	25		30		Personal Property Tax due June 30.	_ Yes 🔉 No
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New Register	ed Agent
			81	Name		
GRANT, MARK F			82	Street A	ddress (P.O. Box Number is Not Acceptable)	
200 EAST BROWARD BLVD. FT. LAUDERDALE FL 33301			83			
, , , , , ,			84	City		85 Zip Code
·		· · · · · · · · · · · · · · · · · · ·	- 1	•		<b>"L</b>
office or i	r <b>egist</b> ered agent, or both, in the Stat	le of Florida. Such change was at	uthorized by	the corp	corporation submits this statement for the purpos oration's board of directors. I hereby accept the	e of changing its registered appointment as registered
•	im familiar with, and accept the obli	gations of, Section 617.0503, Flor	rida Statutes			
SIGNATURE	Signature, typod or printed name of registered a	gent and little if applicable (NOTE	Registered Ager	t signature r	equired when reinstating) DAT	E .
12.	<del></del>	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	
TITLE	D DELETE				ST STOWNER A	Change Addition
NAME STREET ADDRESS	COSTELLO, RICHARD A 1401 UNIVESITY DRIVE SUITE 200		1.2 NAME CC		COSTELLO, RICHARD A.	
CITY-ST-ZIP	6054 655466 FL 44454		1.4 City-St-Zip			
TITLE	VD DELETE		2.1 TITLE	<u> </u>		Change Addition
NAME	FANT, ALAN		2.2 NAME			
STREET ADDRESS	THE STATE OF THE COLLEGE			ADDRESS		
CITY - ST - ZIP	CORAL SPRINGS FL 33071		2. 4 CITY - S	T-ZIP		Change Addition
TITLE NAME	STD DELETE PORTNOY, LAWRENCE		3.1 TITLE 3.2 NAME	ł	PD DODUNOS I AMBENGE	Change Addition
STREET ADDRESS	A SECTION OF THE PROPERTY OF T		3.3 STREET	ADDRESS	PORTNOY, LAWRENCE	
CITY-ST-ZIP	CORAL SPRINGS FL 33071	L 200	3.4 CITY-S			
TITLE	P	<b>⊠</b> DELETE	4.1 TITLE			Change Addition
NAME	FOWLER, THERESA		4. 2 NAME	1		
STREET ADDRESS 1401 UNIVERSITY DR, STE. 200			4.3 STREET ADDRESS			4 .
CITY-ST-ZIP TITLE	CORAL SPRINGS FL	DELETE	4.4 CiTY-ST 5.1 TITLE	- ZIP		Charge Addition
NAME		C Vecel	5.1 THE		Λ	
STREET ADDRESS			5.3 STREET	ADDRESS	4	
CITY-ST-ZIP			5.4 CiTY-ST		<i>_</i>	
TITLE		DELETE	61 TITLE		والمناسف والمال	Change Addition
NAME			6.2 NAME		9000025478	
<u> </u>			6.3 STREET A	- 1	-06/04/9801070 ***61.25	'005
CITY - ST - 7IP	ı / \		6.4 CITY - ST	-7IP	THE PROPERTY OF THE PARTY OF TH	

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 trustets 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 the address.

**SIGNATURE:** 

4/16/98 (954) 753-1730