

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
 AMOUNT DUE ON OR BEFORE 09/15/99: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
 Katherine Harris  
 Secretary of State  
 DIVISION OF CORPORATIONS

FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS  
 99 SEP 27 AM 9:54

DOCUMENT # N96000001150

1. Corporation Name  
 THE LANDINGS AT FOREST LAKES HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business: 550 BILTMORE WAY - SUITE 1110 CORAL GABLES FL 33134  
 Mailing Address: 550 BILTMORE WAY - SUITE 1110 CORAL GABLES FL 33134



|   |   |   |
|---|---|---|
| 2. Principal Place of Business<br>21 111 Fontainebleau Blvd | 2a. Mailing Address<br>26 111 Fontainebleau Blvd. | 3. Date Incorporated or Qualified<br>02/28/1996   |
| Suite, Apt. #, etc.<br>22                                   | Suite, Apt. #, etc.<br>27                         | 4. FEI Number<br>NOT APPLICABLE   |
| City & State<br>23 Miami, FL                                | City & State<br>28 Miami, FL                      | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required                    |
| Zip<br>24 33172   | Country<br>25 USA                                 | 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees |

|   |  |
|---|--|
| 9. Name and Address of Current Registered Agent<br>GRIFFIN, DAVID<br>13798 NW 4 STREET<br>STE 300<br>SUNRISE FL 33325 | 10. Name and Address of New Registered Agent<br>81 Name SKRLD, INC.<br>82 Street Address (P.O. Box Number is Not Acceptable) 201 Alhambra Circle<br>83 Suite 201<br>84 City Coral Gables, FL 85 Zip Code 33134 |
|---|--|

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 SKRLD, INC. By Lisa A. Lerner, Secretary *Lisa A. Lerner* 8-27-99  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

| 12. OFFICERS AND DIRECTORS |  | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |   |
|----------------------------|--|---|---|
| TITLE<br>VPD               | BRIVERMAN, FELIX<br>13798 NW 4 STREET, STE 300<br>SUNRISE FL 33325 | 1.1 TITLE<br>PD                                       | Steve Al-Jaroudi<br>16236 SW 100th Terrace<br>Miami, FL 33196     |
| TITLE<br>SD                | DOSSAT, FRANCINE<br>13798 NW 4 ST, STE 300<br>SUNRISE FL 33325     | 2.1 TITLE<br>VPD                                      | Alvaro Facio-Lince<br>10126 SW 163rd Place<br>Miami, FL 33196     |
| TITLE<br>PD                | GRIFFIN, DAVID<br>13798 NW 4 ST, STE 300<br>SUNRISE FL 33325       | 3.1 TITLE<br>STD                                      | Ricardo E. Zambrano<br>10145 SW 163rd Place<br>Miami, FL 33196    |
| TITLE<br>TD                | OZKILKIS, DONN<br>13798 NW 4 ST, STE 300<br>SUNRISE FL 33325       | 4.1 TITLE   | 000003006280--6<br>-10/05/99--01094--016<br>*****61.25 *****61.25 |
| TITLE                      |  | 5.1 TITLE   |   |
| TITLE                      |  | 6.1 TITLE   |   |

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 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, with all other like empowered.

SIGNATURE: *Steve Al-Jaroudi* 10/3/99/99 305/559-4400  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #

000831

CR2E037 (5/99)