FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED May 18 1998 8:00am Secretary of State

THE LITTLE RIVER INDUSTRIAL DISTRICT PROPERTY OW NERS' ASSOCIATION, INC.									
Principal Place of Business		Mailing Address				ı impiribi bio iniin dilik dübil odili dülil düli	i warki atama italia ()	Brit i#Bt i#Bt	
AKERMAN SENTERFITT 8 EIDSON. PA ONE S.E. THIRD AVE. 28 FLOOR MAAM FL 3313		AKERMAN SENTERFITT & EIDSON. PA ONE S.E. THIRD AVE. 28 FLOOR MIAMI FL 3313				 3. Date Incorporated or Qualified 08/09/1996 4. FEI Number 65~0730367 APPLIED-FOR 	▶ ———	pplied For	
2. Principal Place of Business		2a. Mailing Address				5. Certificate of Status Desired	\$8.75 A	Additional	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				Election Campaign Financing Trust Fund Contribution Added to Fees			
City & State		City & State				7. Is this nonprofit corporation a homeowners association?			
Zip	Country 25 9. Name and Address of Current	Zip	30 Cour	itry 		This corporation owes or has paid the Personal Property Tax due June 30. Name and Address of New Registers	Yes [angible No	
	Harite and Modress of Collect	r meðistaran wiðatir	—	Name		A LIGHT WOULDS OF HOM HOGISTOR	r vôaur		
BEZOLD, RICHARD M ESQ. AKERMAN SENTERFITT & EIDSON, PA						Address (P.O. Box Number is Not Acceptable)			
ONE S.E	. THIRD AVE, 28 FLOOR			33					
MIAMI FL 3313			T.	34 City			L	Code	
	o the provisions of Sections 617.0502 agistered agent, or both, in the State on familiar with, and accept the obligation	2 and 617.1508, Florida Sta of Florida. Such change wa ations of, Section 617.0503,	itutes, the ab as authorized Florida Statu	ove-named by the cor tes.	corpora poration	ation submits this statement for the purpose is board of directors. I hereby accept the a	of changing it pointment as	s registered registered	
SIGNATURE _	Signature, typed or printed name of registered agen	int and lifte if applicable (f	NOTE: Registered	Agent signature	e required w	when reinstaling) DATE			
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	S IN 12	
TITLE	PD	X DELETE	1.1 TITI	E	<u> Pyd</u>	'	☐ Change	* Addition	
NAME	LOVE, JACK		1,2 NAJ	1.2 NAME R		tt Flanders		Į.	
STREET ADDRESS	6851 N.E. 2ND AVE		1.3 STR	1.3 STREET ADDRESS 6		1 N.E. 2nd Ave.			
CITY-ST-ZIP	MIAMI FL 33138		1.4 CIT	Y-ST-ZIP	Mia	mi, FL 33138		J	
TITLE	VD	☐ DELETE	2.1 TIT	2.1 TITLE			Change	Addition	
NAME	STEINER, MICHAEL S		2.2 NA	AE	1			{	
STREET ADDRESS	290 S.E. 68TH STREET		2.3 STREET ADORESS		ĺ			1	
CITY-ST-ZW	MIAMI FL 33138		2 4 01	2 4 CiTY-ST-ZIP					
TITLE	STD	DELETE	3.1 TIT	E			Change	☐ Addition	
NAME	PUMO, BENNET		3.2 NA	AE .				ļ	
STREET ADDRESS	7327 N.W. MIAMI COURT		3.3 STR	EET ADDRESS)			}	
CITY-ST-ZIP	MIAMI FL 33150		3.4. CI)	Y-ST-ZIP	<u></u>				
TITLE		DELETE	4.1 TiTI	E			☐ Change		
HAME			4. 2 NA	ME	1			İ	
STREET ADDRESS			4.3 STF	eet address				Į	
CITY-ST-ZIP			4.4 CIT	r-st-zip	<u> </u>				
TITLE		☐ DELETE	5.1 T(T)	£	1		Change	Addition	
NAME			5.2 NA	AE.	({	
STREET ADDRESS			5 3 STF	eet addaess	}			ļ	
CITY-ST-ZIP			5 4 CIT	-ST-ZIP	<u> </u>				
TITLE		DELETE	61 TITI	.E			Change	Addition	
NAME			6.2 NA	AE .	1				
STREET ADDRESS			6.3 STF	eet adoress				,	
CITY-ST-ZIP			€.4 CiT	r-ST-ZIP					
3 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1									

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.

4/20/98

Daytime Phone * 0026420