FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

May 26 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N96000004446 (8)

BHISTOL LAKES HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business	Mailing Address		ם ונונסס נונסס ונונסס וננוס פונסג סנס וסוונסטו נ	IBNIA BONIA ONDIA BIDIA BADAD DAN 1881	
10100 W. SAMPLE ROAD #205 CORAL SPRINGS FL 33065-4004	10100 W. SAMPLE F CORAL SPRINGS FL		3. Date Incorporated or Qualified 08/26/1996		
			4. FEI Number / S-0820 APPLIED FOR	Applied For Not Applicable	
Principal Place of Business 1	26. Mailing Addres		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
Suite, Apt. #, etc.	Suite, Apt. #, e	tc.	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
City & State	City & State		7. Is this nonprofit corporation a homeo		
Zip Country	28	Country	8. This corporation owes or has paid th		
24 25	29	30	Personal Property Tax due June 30.	Yes No	
9. Name and Address of Curr	ent Registered Agent		10. Name and Address of New Regist	ered Agent	
_		81 Name	Marshall I dia	MPS	
TRANTALIS, DEAN'J.		82 Street	Address (P.O. Box Number is Not Acceptable)		
9724 W. SAMPLE RD.		101	Address (P.O. Box Number is Not Acceptable)	KOCICA	
CORAL SPRINGS FL 32065-4004		83	it 205		
)		84 City	<u> </u>	- 85 Zip.Code	
			oral Springs	FL 3300S	
11. Pursuant to the provisions of Sections 617 0 office or registered agent, or both, in the Sta agent 1 am familiar with, and account to oth	502 and 617,1508, Florida	Statutes, the above-named	corporation submits this statement for the purpo	ose of changing its registered	
agent. Fam familiar with, and accept the obl	ligations of Suction 617.0	503, Florida Statutes.	poration's board of directors. Thereby accept the	appointment as registered	
SIGNATURE THE SUNKER ME	skickt !	JAMES MAK	S/19 LL 4/8/	4 B	
	agond and fille if upply able	(NOTE Registered Agent signature	required when reinstating) D	ATE	
	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS		
TITLE PD	☐ DELE	2	5 T	Change	
NAME MARSHALL, JAMES		1.2 NAME			
STREET ADDRESS 10100 W. SAMPLE ROAD #		1.3 STREET ADDRESS			
CORAL SPRINGS FL 33065-	-4004	1.4 CHY-ST-ZIP		Change Addition	
TITLE VSTD	L ™ Dett		₽	Change Addition	
NAME RAYANI, SHAMS		2.2 NAME			
STREET ADDRESS 10100 W. SAMPLE ROAD #		2.3 STREET ADDRESS			
CITY-ST-ZIP CORAL SPRINGS FL 33065-		2 4 CHY-ST-ZIP		The second second	
TIRE VO	DAL DELF	1 1		Change Addition	
NAME CABAY RANDALL	<u></u>	3.2 NAME			
STREET ADDRESS 10.100 W. SAMPLE ROAD	205	3 3 STREET ADDRESS			
CITY-ST-7IP CORAL SPRINGS FL	T APO	3.4. CITY - ST - ZIP		Change Y Addition	
PD	DÊLE		k	Change & Addition	
Weiss, Philip		4.2 NAME		PE	
STREET ADDRESS 10100 W. Sample Road, #205		4.3 STREET ADDRESS		5.26	
CITY-ST-ZIP Coral Springs, Flo	orida 3306 <u>5-40</u>	104 4.4 GITY - ST - 7H'			
TIRE	L_) DELE		D	Change 4 Addition	
NAME		5.2 NAME	JACK DOUCETTE		
STREET ADORESS		5.3 STREET ADDRESS	10100 M. SAMPLE ROAD	SUITE 205	
DITY-ST-ZIP		54 CITY - ST - ZIP	CODAL CORTHON DECOM	- 	
TITLE	······································		CORNT SEKTION - FPOXI	DA 33065	
	☐ DELE	TE 61 TITLE	CORAL SPRINGS, FLORI	DA 38065 Addition	
NAME	☐ DELE	TE 61 TITLE 6.2 NAME	CORAL SPRINGS, FDORIS	DA 33865 Addition	
NAME STREET ADDRESS	☐ DELE	TE 61 TITLE	CORAL SPRINGS, FLORIS	DE P. \$70.40	

14. Thereby 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 suppliemental 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 truston empowered to execute this report as required by Chapter 817. Florida Statutos; and that my name appears in Block 13 it chapted on an attachment with an address. SIGNATURE: