

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N96000004843

1. Corporation Name

WYNDHAM LAKES CENTRAL HOMEOWNERS ASSOCIATION,
INC.

Principal Place of Business

Mailing Address

8000 GOVERNORS SQUARE BLVD.
STE # 101
MIAMI LAKES, FL 33016

(same)

FILED

97 JUN 27 PM 3:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 9-16-96		3a. Date of Last Report	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 65-0735497		Applied For Not Applicable	
22	City & State	27	City & State	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required			
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees			
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Freddy Marante
8000 Governors Square Blvd. #101
Miami Lakes, FL 33016

81 Name

Gregory W. Jordan

82 Street Address (P.O. Box Number is Not Acceptable)

8000 Governors Square Blvd.
#101

84 City

Miami Lakes, FL

FL

85 Zip Code

33016

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

Gregory W. Jordan

6/16/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PRESIDENT <input checked="" type="checkbox"/> DELETE	1.1 TITLE	PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FREDDY MARANTE	1.2 NAME	GREGORY W. JORDAN
STREET ADDRESS	8000 GOVERNORS SQUARE BLVD #101	1.3 STREET ADDRESS	8000 GOVERNORS SQUARE BLVD. #101
CITY-ST-ZIP	MIAMI, FL 33016	1.4 CITY-ST-ZIP	MIAMI LAKE, FL 33016
TITLE	VICE PRESIDENT <input checked="" type="checkbox"/> DELETE	2.1 TITLE	VICE PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SANDRA LEE TOWNSEND	2.2 NAME	CANDACE SHARPSTEEN
STREET ADDRESS	8000 GOVERNORS SQUARE BLVD #101	2.3 STREET ADDRESS	8000 GOVERNORS SQUARE BLVD. #101
CITY-ST-ZIP	MIAMI LAKES, FL 33016	2.4 CITY-ST-ZIP	MIAMI LAKES, FL 33016
TITLE	SECRETARY <input checked="" type="checkbox"/> DELETE	3.1 TITLE	SECRETARY <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHRISTINA MONKEWICZ	3.2 NAME	FRANCES J. GUERRA
STREET ADDRESS	7001 N. SCOTTSDALE RD. #2050	3.3 STREET ADDRESS	8000 GOVERNORS SQUARE BLVD. #101
CITY-ST-ZIP	SCOTTSDALE, AZ 85253	3.4 CITY-ST-ZIP	MIAMI LAKES, FL 33016
TITLE	TREASURER <input checked="" type="checkbox"/> DELETE	4.1 TITLE	TREASURER <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHRISTINA MONKEWICZ	4.2 NAME	FRANCES J. GUERRA
STREET ADDRESS	7001 N. SCOTTSDALE RD. #2050	4.3 STREET ADDRESS	8000 GOVERNORS SQUARE BLVD. #101
CITY-ST-ZIP	SCOTTSDALE, AZ 85253	4.4 CITY-ST-ZIP	MIAMI LAKES, FL 33016
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	500002227375--4
STREET ADDRESS		5.3 STREET ADDRESS	-07/01/97--01027--001
CITY-ST-ZIP		5.4 CITY-ST-ZIP	****306.25 ****70.00
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	Gregory Jordan's secretary
STREET ADDRESS		6.3 STREET ADDRESS	frances authorized to
CITY-ST-ZIP		6.4 CITY-ST-ZIP	for directors 6/30/97

14. I do 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.

SIGNATURE:

Gregory W. Jordan

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/16/97

Date

(305) 512-4954

Daytime Phone #

CR2E037 (9/96)