SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997 AMOUNT DUE ON OR BEFORE 9/17/97: \$81.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

FILED Jul 25 1997 8:00am Secretary of State

	199/		STILL STATE OF THE	UI	VISION OF	CORPORA	HIC	ONS			or o ca	• •		acc
DOCUN 1. Corporation	MENT n Name													
THE VINEYARDS AT LAUDERHILL HOMEOWNERS' ASSOCIAT														
ION, INC.										i (88)(11 i i i i i i i i i i i i i i i i i i				
Principal Place of Business Malling Address									\dashv					
•														
3601 W. COMMERCIAL BLVD 3601 W. COMMERCIAL BLVD SUITE 35									i					
FT. LAUDERDALE FL 33309 FT. LAUDERDALE FL 33309											NOT WRITE			
										 Date Incorporated 10/14/1996 		3a. U	ate of Last Re	about
2. Principal Pi	lace of Busin	ness		2a. Mailing Address						4. FEI Number			 	plied For
21	** - * - * - * - * - * - * - * - * - *			26					-+	265-0	677 40			t Applicable
Suite, Apt.	W, OIC.			Suite, Apt. #, etc.						Certificate of Statu	us Desired		\$8.75 A	
City & State	0			City & State						6. Election Campaig	n Financing	_	\$5.00	
23		,		28						Trust Fund Contrit			Added t	
Zip	Country			Zip	\vdash	Country			8. This corporation of	-			angible No	
24	25 29 9. Name and Address of Current Regis				<u> </u>					Personal Property Name and Addre				B 100
	<u> </u>						81	Name						
DAVIS, KENNY M									44	(D.O. Day, N. mahan ta	Mat Assesse	hla\		
3601 W. COMMERCIAL BLVD								Street At	ouress	(P.O. Box Number is	Mor Accebia	ule)		l
SUITE 35											·			
FT. LAUDERDALE FL 33309										 			85 Zip (Code
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation of the corporation of the state of Florida. Such change was authorized by the corporation agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.												FL	. `	
11. Pursuant i	to the provis	tions of Section	ns 617.0502 an in the State of F	id 617.1508, F Jorida, Such c	Florida Statu change was	tes, the ab authorized	ove hv	e-named c	orpora oration	tion submits this state s board of directors. I	ement for the I hereby acce	purpose o	of changing its pointment as	s registered registered
agent. I a	m familiar w	ith, and accer	of the obligation	s of, Section	617.0503, FI	orida Statu	ites	s.						
SIGNATURE .	Classical transfer		I registered agent and	4 Mar 14 1: 1-1-	/UO	T. Dealstone	***			hen reinstating)		DATE		
12.	Signature, types		ICERS AND DI		(NO	13.	- Age	in a griature re	adonar w	ADDITIONS/CHANG	GES TO OFFI		D DIRECTOR	\$ IN 12
TITLE	PD				DELETE	1.1 TIT	LE				***	· · · · · · · · · · · · · · · · · · ·	Change	Addition
NAME	DAIVS, H	Kenny M				1.2 NA	ME							ļ
STREET ADDRESS	3601 W.	COMMERCI	ial blvd, sti	TE 35				ADDRESS						ļ
CFTY-ST-ZIP		derdale fl	. 33309		1.4 CIT	1.4 CITY-ST-ZIP								
TITLE	VSTD	41414314		L	DELETE	2.1 TITI 2.2 NA							Change	☐ Addition
NAME	DAIVS, MICHELLE													
STREET ADDRESS	ET I SUPERDALE EL BOARD						2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP							
CITY-ST-ZIP TITLE	D D	DENDALE FL	. 33308		DELETE	2. 4 CI 3.1 TIT		ST-ZIP	-				Change	Addition
NAME	, -	I, CHRISTIN	FM		_ >	3.2 NA							C. Ondrigo	
STREET ADDRESS			ial blvd, sti	E 35		•		ADDRESS						}
City-St-ZIP		DERDALE FL		- **		3.4. CI								-
TITLE					DELETE	4.1 TiT	LE						☐ Change	Addition
NAME						4. 2 NA	WE							1
STREET ADDRESS						4.3 \$16	reet	ADDRESS						
CITY-ST-ZIP					_	4.4 CIT	Y-5	T-21P						
TITLE					DELETE	5.1 7 1T							Change	☐ Addition
NAME						5.2 NA								
STREET ADDRESS								ADDRESS						
CITY-ST-ZIP					T DELETE	5.4 CIT		T-21P					Change	Addition
TITLE				L	DELETE	6.1 TIT							L. Criange	Addition
NAME CTREET ANABECC						6.2 NA		ADDDEGG						

6.4 CITY-ST-ZIP CITY-ST-ZIP 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 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 ghanged, or on an attachment with an address.

SIGNATURE:

(954) 739-9099