FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Jan 20 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000046947 (4)

BARRINGTON CLUB APARTMENTS, INC.

						1 100 (100 (100 (100 (100 (100 (100 (10
Principal Place of Business Mailing Address						r constant sin (orni next) both doint not it did of the diff and it did it individual
10700 WEST SAMPLE ROAD CORAL SPRINGS FL 33065 US		PO BOX 1831 BOCA RATON FL 3429 US	BOCA RATON FL 3429-831			DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						06/16/1995
	lace of Business	2a. Mailing Address				4. FEI Number Applied For
Suite, Apt.	# 6/0	26 Suite Ant # ate	Suite, Apt. #, etc.			65-0589863 Not Applicable
22		27	7			5. Certificate of Status Desired See Required Fee Required
City & Stat	e	City & State				6. Election Campaign Financing \$5.00 May Be
Zip Country			Zip Country			Trust Fund Contribution
24	25	29	30	Ontry		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
	9. Name and Address of Curre		130	T		10. Name and Address of New Registered Agent
FO	RMAN, ROBERT S			B1	Name	
	2101 W. COMMERCIAL BLVD., SUITE 4100					
	LAUDERDALE FL 33309	AIL 4100		82	Street	et Address (P.O. Box Number is Not Acceptable)
11.	ENOUGHDALL I E 33308			83		**************************************
				Ш		
				84	City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607 1508, Florida Sta	lutes, the a	bove	named	ad perveration authority this atstance to the second of th
Office of t	egistered agent, or both, in the Stat m familiar with, and accept the obli	le of Florida. Such change wa	is authorizo	od by	the cor	corporation's board of directors. Thereby accept the appointment as registered
	The restriction with the discount the con-	ganoris or, econori dor .0000,	i ionoa sia	nuics		
SIGNATURE	Signature, typod or proited name of registerest a	port and the it applicable (N	OTE: Register	ed Agei	nt signature	lure required when reinstating) [3A1]
12.	OFFICERS AF	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	111	IILE	•	Change Addition
NAME	shimm, kenneth l		1.2 N	IMME		10
STREET ADDRESS	#190 QUEENFERRY CIRCLE		≯ 1.3 S	TREET	ADDRESS	8 2101 W. COMMERCIAL BLVD, SUITE 4100
CITY-ST-ZIP	BOCA RATON PL		1.40	11Y - SI	- Z IP	\$ 2101 W. COMMERCIAL BLVD, Suite 4000 FF. LANDER OFLE, FL 33309
TITLE		☐ DELFTE	2.1 T	ITLE		☐ Change ☐ Addition
NAME			2.2 N	AME		
STREET ADDRESS			2.3 \$	TREE L	ADDRESS	S
CITY+ST-ZIP			2. 4 CITY - S1 - ZIP		1- ZIP	
TITLE		L J DELETE	3.1 11			Change Addition
NAME			3.2 N			
STREET ADDRESS					ADDRESS	S
CITY-ST-ZIP		Theire	3.4. CHY+ST-7IP DELETE 4.1 YILE		1 - 71P	10
NAME						Change Addition
STREET ADDRESS			4.2 N		(Dispres	
CITY-ST-ZIP			4	IREE / (14 - ST	ADDRESS	5
TITLE		☐ DELETE	DELETE 517		- ZIF	Change Addition
NAME		VIVII	5.2 N			La change La Adollion
STREET ADDRESS			and the second		ADDRESS	
CITY-ST-ZIP						<u> </u>
TITLE		DELETE	54 CHY-ST-7IP 61 TILL			Change Addition
NAME			62 N			County Living
STREET ADDRESS					ADDRESS	s
CITY-ST-ZIP				TY-ST		
14. I hereby c	erlify that the information supplied s	with this filing does not qualify	for the exe	empti	on slate	ated in Section 119.07(3)(i), Florida Statutes. I further certify that the information
indicated on this armuel 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 an officer annual report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attention with an address.						