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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STA

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000051950 (9)

BROOKMAN-FELS AT COUNTRY CLUB ESTATES, INC.

FILED Apr 30 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				E EGOLODEI VED ADITA ATTIL BOLIV DEINI DEINI DEINI BILAN STORM IBIOL BINN DON			*** ****
3800 8 OCEA	AN DR SUITE G-9	3800 S OCEAN DR	3800 S OCEAN DR				
HOLLYWOOD FL 33019		G-9		DO NOT INDITE IN	LTING ODAGE		
US		HOLLYWOOD FL 33019 US		3. Date Incorporated or Qualified	DO NOT WRITE IN THIS SPACE		
		U.S			06/18/1996		
2 Principal Pi	lace of Business	2a. Mailing Address			4. FEI Number	1 14	plied For
21	ace of Bosiliess	26			65-0685044		ot Applicable
Suite, Apt. #_etc.		Suite, Apt. #, etc.		S8 75 Additional			
22 940	PARBORISLANDS DK		SLAN.	NC 24	5. Certificate of Status Desired	☐ \$6.75 / Fee Re	
City & State	9	City & State		Ψ.	6. Election Campaign Financing	\$5.00	May Ba
23					' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	Added t	
Zip	Country	Zip	Country		8. This corporation owes or has paid	the current year int	angible
24	25	29	30		Personal Property Tax due June 3	o. 🛛 Yes 🗀] No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Regi	stered Agent	
	V ag e, Craig D		81	Name			
801 N.E. 167TH STREET				82 Street Address (P.O. Box Number is Not Acceptable)			
SUITĘ 302				<u> </u>		<u> </u>	
NC NC	DRTH MIAMI FL 33162		83				
			84	City		85 Zip (Code
				<u> </u>		<u>FL </u>	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statute of Florida, Such change was a	s, the abov	re-named co	prporation submits this statement for the pure ration's board of directors. I hereby accept	pose of changing it	s registered registered
agent. I a	m familiar with, and accept the obliga	tions of, Section 607.0505, Flo	rida Statute	S.	allows board of amounts. Thereby accordi	in appointment as	. og.o.o.o
SIGNATURE							
	Signature, typod or printed name of registered agen			ent signature red	puired when reinstating)	DATE	
12.	OFFICERS AND	DELETE	13.	·····	ADDITIONS/CHANGES TO OFFICE	Change	Addition
TITLE	LEVY, MICHAEL	C DECERT	1.1 TITLE			□ Cuange	Addition
NAME	5901 S.W. 111 STREET		1.2 NAME		IN HARBOR ISLAND	NG 20	
STREET ADDRESS	MIAMI FL			T ADDRESS	HOLLY WOOD FL 3:	3.4.10	
CITY-ST-ZIP	PD	DELETE	1.4 CITY - 5 2.1 TITLE	ST-ZIP	MOLLY WOOD PC J.	☐ Change	Addition
TITLE	FELS. JON	officir				C. G. Isa igo	
NAME	5901 SW 111 STREET		2.2 NAME		940 HARBOR ISLAN	את זמע	
STREET ADDRESS	MIAMI FL			1 ADDRESS	HOLLYWOOD FL	33019	
CITY-ST-ZIP	VD VD	DELETE	2.4 CITY- 3.1 TITLE	ST-ZIP	HOLLY WOOD PO	☐ Change	Addition
TITLE	OFFENBERG, BERNARD		3.2 NAME				ا الماليات ال
NAME	3800 S OCEAN DR G-9				OUD HARBOR ISLAN	IDS DR	Ì
STREET ADDRESS	HOLLYWOOD FL			1 ADDRESS	HOLLY WOOD FL	33119	
CITY-ST-ZIP TITLE	HOLET HOUD I E	☐ DELETE	3.4. CITY - 4.1 TITLE	51-ZIP	HOLVI WOOD FU 3	☐ Change	Addition
-		OLCCIE				orango	
NAME			4.2 NAME	- 1			
STREET ADDRESS			P	T ADDRESS			
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-5 5.1 TITLE	51-ZIP		Change	Addition
NAME			5.1 THEE	İ		- cushigo	
				TADDOECC			
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-S	01 - ZIP		Change	Addition
NAME		otter	6.2 NAME				
STREET ADDRESS				T ADDRESS			
]							
CITY-ST-ZIP	pertify that the information supplied with	h this filing does not qualify to	64 CITY-S		in Section 119.07(3)(i), Florida Statutes. I fu	rther certify that the	information
indicated	on this annual report or supplemental	annual report is true and accu	rate and th	at my signa	ture shall have the same legal effect as if m	lade under oath; the	at I am an

I. 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 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

11/1/0

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