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

Mailing Address

CHITE TOO

3170 N FEDERAL HIGHWAY

LIGHTHOUSE POINT FL 33064

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000101634

1. Corporation Name

Principal Place of Business

3170 N FEDERAL HIGHWAY

LIGHTHOUSE POINT FL 33064

LIGHTHOUSE CONDO MANAGEMENT, INC.

				3. Date Incorporated or Qualified 12/02/1998			
2. Principal Place of Business 2a. Mailing Address					4, FEI Number	App	lied For
— ·	, .				65-0877847	 	Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.				8.75 Ac	lditional
22 S V/1		27 Suite 116			5. Certificate of Status Desired Fee Required		
	City & State City & State			6. Election Campaign Financing \$5.00 May Be			lay Be
23					Trust Fund Contribution	Added to	Fees
Zip Country Zip			Country		This corporation owes the current year Intangil		٦
24	25	29 3	30		Personal Property Tax.		□ No
	9. Name and Address of Current	Registered Agent	81	Mana	10. Name and Address of New Registered Age	nt	
SMITH, ROBERT H 3170 N FEDERAL HIGHWAY SUITE 100				Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
							<u>-</u>
LIGHTHOUSE POINT FL 33064			84	84 City		5 Zip Co	ode
					FL T	<u> </u>	!_4
office or a agent. I a	registered agent, or both, in the State o am familiar with, and accept the obligati	i Florida. Such change was aut	inorizea by	tne corpo	corporation submits this statement for the purpose of char ration's board of directors. I hereby accept the appointme	nt as regi	istered
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE: F	Registered Ager	t signature re	quired when reinstating} DATE		
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND D	O OFFICERS AND DIRECTORS IN 12	
TITLE	P/n R-NOID J. NATSEA	5R DELETE	1.1 TITLE		·	Change	Addition
NAME	P/O R-NALD J. NASSEL 650 N.W. 75TERN	2 - 14 -	1.2 NAME				
STREET ADDRESS	630 N.W. /612 XM	9-57 M 205	1.3 STREE	ADDRESS			
CITY-ST-ZIP	MAAAATE EL 22-13			T-ZIP			
TITLE	SITIO PARRAGO	C ALASSA DELETE	2.1 TITLE			Change	Addition
NAME	OFFICE DAZONKA	7 77 0 0 - ~	2.2 NAME	ļ			
STREET ADDRESS	650 N.W. 76 /ERKIN	7-51/19-20	2.3 STREE	ADDRESS			
CITY-ST-ZIP	MARGATE	· FL 33-63	2.4 CITY-S	T-ZIP			
TITLE	7	☐ DELETE	3.‡ TITLE	Į		Change	☐ Addition
NAME			3.2 NAME				
STREET ADDRESS	3		3.3 STREE	TADDRESS			
CITY-ST-ZIP			3.4. CITY-S	IT-ZIP			— • • • • • • • • • • • • • • • • • • •
TITLE	1	☐ DELETE	4.1 TITLE	1	Ц	Change	☐ Addition
NAME			4. 2 NAME				
STREET ADDRESS	S .		4.3 STREE	TADDRESS			
CITY-ST-ZIP			4.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	5.1 TITLE)	L	Change	Addition Addition
NAME			5.2 NAME				
STREET ADDRESS	6			FADDRESS			
CITY-ST-ZIP			5.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	6.1 TITLE			Change	☐ Addition
NAME			6.2 NAME				
STREET ADDRESS	s		6.3 STREE	TADORESS			
CITY-ST-ZIP			6.4 CITY-S			b - 4 4b - 7	fames attan
indicated officer or	t on this appual report of supplemental	annual report is true and accurate or trustee empowered to ex-	ate and tha ecute this r	t my signa eport as ri	in Section 119.07(3)(i), Florida Statutes. I further certify tature shall have the same legal effect as if made under or equired by Chapter 607, Florida Statutes; and that my nate.	มแน แบบเ	aill all

FILED May 07, 1999 8:00 am Secretary of State

05-07-1999 90005 010 ***150.00

DO NOT WRITE IN THIS SPACE