

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 727703 (1)
1. Corporation Name
OAKBROOK CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business: **8200 S.W. 24TH STREET N. LAUDERDALE FL 33068**
Mailing Address: **8200 S.W. 24TH STREET N. LAUDERDALE FL 33068**

3. Date Incorporated or Qualified: **10/09/1973**
3a. Date of Last Report: **06/14/1995**

2. Principal Place of Business (21-24) and Mailing Address (2a-26) details including Suite, Apt. #, etc., City & State, Zip, and Country.

4. FEI Number: **59-1575932**
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent:
**SCHWARTZ, MORRIS
8240 S.W. 24TH STREET
BLD. #5-105
NORTH LAUDERDALE FL 33068**

10. Name and Address of New Registered Agent (81-85):
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code: **FL**

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: P	NAME: SCHWARTZ, MORRIS	1.1 TITLE: V/D	1.2 NAME: [Change] [Addition]
STREET ADDRESS: 8240 S.W. 24 ST., APT. 105	CITY-ST-ZIP: N. LAUDERDALE FL 33068	1.3 STREET ADDRESS:	1.4 CITY-ST-ZIP:
TITLE: VD	NAME: COOPER, JACK	2.1 TITLE: P/D	2.2 NAME: [Change] [Addition]
STREET ADDRESS: 8100 S.W. 24 ST. APT. 311	CITY-ST-ZIP: N. LAUDERDALE FL	2.3 STREET ADDRESS: 8220 S.W. 24 ST. APT. 214	2.4 CITY-ST-ZIP: N. LAUDERDALE, FL
TITLE: TD	NAME: LEEB, NORMAN	3.1 TITLE:	3.2 NAME: [Change] [Addition]
STREET ADDRESS: 8280 S.W. 24 ST. APT. 303	CITY-ST-ZIP: N. LAUDERDALE FL 33068	3.3 STREET ADDRESS:	3.4 CITY-ST-ZIP:
TITLE: T	NAME: FRIEDLAND, GEORGE	4.1 TITLE:	4.2 NAME: [Change] [Addition]
STREET ADDRESS: 8140 S.W. 24 ST. APT. 305	CITY-ST-ZIP: N. LAUDERDALE FL 33068	4.3 STREET ADDRESS:	4.4 CITY-ST-ZIP:
TITLE: SD	NAME: GOODMAN, BERNICE	5.1 TITLE:	5.2 NAME: [Change] [Addition]
STREET ADDRESS: 8280 S.W. 24 ST. APT. 301	CITY-ST-ZIP: N. LAUDERDALE FL 33068	5.3 STREET ADDRESS:	5.4 CITY-ST-ZIP:
TITLE: TD	NAME: PATCHEN, SHIRLEY	6.1 TITLE:	6.2 NAME: [Change] [Addition]
STREET ADDRESS: 8240 S.W. 24 ST. APT. 314	CITY-ST-ZIP: N. LAUDERDALE FL 33068	6.3 STREET ADDRESS:	6.4 CITY-ST-ZIP:

1.1 TITLE: V/D	1.2 NAME: [Change] [Addition]
1.3 STREET ADDRESS:	1.4 CITY-ST-ZIP:
2.1 TITLE: P/D	2.2 NAME: [Change] [Addition]
2.3 STREET ADDRESS: 8220 S.W. 24 ST. APT. 214	2.4 CITY-ST-ZIP: N. LAUDERDALE, FL
3.1 TITLE:	3.2 NAME: [Change] [Addition]
3.3 STREET ADDRESS:	3.4 CITY-ST-ZIP:
4.1 TITLE:	4.2 NAME: [Change] [Addition]
4.3 STREET ADDRESS:	4.4 CITY-ST-ZIP:
5.1 TITLE:	5.2 NAME: [Change] [Addition]
5.3 STREET ADDRESS:	5.4 CITY-ST-ZIP:
6.1 TITLE:	6.2 NAME: [Change] [Addition]
6.3 STREET ADDRESS:	6.4 CITY-ST-ZIP:

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Murray Schwartz* Date: **4-2-96** Daytime Phone #: **954-722-0410**

CR2E037 (12/95)