

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2004 8:00 am
Secretary of State

04-05-2004 90047 050 ****61.25

DOCUMENT # 707686	
1. Entity Name EVERGLADES HOUSE CONDOMINIUM APARTMENTS, INC.	

Principal Place of Business 2000 SOUTH OCEAN DRIVE FORT LAUDERDALE, FL 33316-3813	Mailing Address 2000 SOUTH OCEAN DRIVE FORT LAUDERDALE, FL 33316-3813 US
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94042762



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

03302004 Chg-NP CR2E037 (10/03)

4. FEI Number 59-1108680	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent RANDALL K. ROGERS & ASSOCIATES, P.A. 6261 N.W. 6TH WAY, STE. 300 BOCA RATON, FL 33487	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature (Typed or Printed Name of Registered Agent and Not Applicable) (NOTE: Registered Agent signature required when registering) DATE

Filing Fee is \$61.25 Due by May 1, 2004	9. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D VETO, FUCCILLO ☒ Delete 2000 S OCEAN DR FT LAUDERDALE, FL 33316	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D MCNAIR, CAROLINE ☐ Change ☒ Addition 2000 S. OCEAN DR. FT. LAUDERDALE, FL 33316
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	SD MISCHEID, CONSTANCE ☒ Delete 2000 S. OCEAN DRIVE FORT LAUDERDALE, FL 33316	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D DELANEY, JOHN ☐ Change ☐ Addition 2000 S. OCEAN DR. FT. LAUDERDALE, FL 33316
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PD POPPER, MELANIE ☐ Delete 2000 S OCEAN DR FORT LAUDERDALE, FL 33316	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VD GRIFFITH, C. RICHARD ☐ Delete 2000 S OCEAN DR FORT LAUDERDALE, FL 33316	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	SD KELLY, PAUL ☐ Delete 2000 S. OCEAN DR FORT LAUDERDALE, FL 33316	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D MEISCHEID, CONSTACE ☒ Delete 2000 S. OCEAN DR FORT LAUDERDALE, FL 33316	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAN N. WILLIAMS 3/29/04 954-525-6392
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date-Time Phone #