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Mar 18 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 718243 (9)

1. Corporation Name
LAUDERDALE OAKS CONDOMINIUM 5, INC.



Principal Place of Business 2801 N.W. 47TH TERRACE LAUDERDALE LAKES FL 33313	Mailing Address 2801 N.W. 47TH TERRACE LAUDERDALE LAKES FL 33313-1755
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3. Date Incorporated or Qualified 03/23/1970	3a. Date of Last Report 02/12/1996
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21. Principal Place of Business 2801 N.W. 47TH TERRACE	26. Mailing Address 2801 N.W. 47TH TERRACE
22. Suite, Apt. #, etc.	27. Suite, Apt. #, etc.
23. City & State LAUDERDALE LAKES FL	28. City & State LAUDERDALE LAKES FL
24. Zip FL 33313	25. Country USA
29. Zip 33313	30. Country USA

4. FEI Number 59-1350952	Applied For Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**COPELAND, EDWARD E.
2801 NW 47TH TERR
LAUDERDALE LAKES FL 33313**

10. Name and Address of New Registered Agent

81. Name HARZSTARK ABRAHAM.
82. Street Address (P.O. Box Number is Not Acceptable) 2801 N.W. 47TH TER # 304
83. City LAUDERDALE LAKES FL
85. Zip Code 33313

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 *Edward Copeland* *Abraham Harzstark* **3/8/97**

Signature, typed or printed name of registered agent and file number (if applicable) (NOTE - Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SCHIFF, RITA 2801 NW 47 TERRACE LAUDERDALE LAKES FL	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SAVATH, SYLVIA 2801 NW 47 TERRACE LAUDERDALE LAKES FL	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ZENNER, ANNE 2801 NW 47 TERRACE LAUDERDALE LAKES FL	<input checked="" type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD COPELAND, EDWARD 2801 NW 47 TERRACE LAUDERDALE LAKES FL	<input checked="" type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP TRUDEAU, YVON 2801 NW 47 TERR LAUDERDALE LKS FL	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		Change	Addition
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	D. BERGERON MONIQUE 2801 N.W. 47TH TER. BLDG 7 # 104 LAUDERDALE LAKES FL 33313.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	D BOULKE ROGER 2801 N.W. 47TH TER. BLDG 7 # 310 LAUDERDALE LAKES FL 33313.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	D. GONDSTEIN, BERTHA. 2801 N.W. 47TH TER. BLDG 7 APT. 402 LAUDERDALE LAKES FL 33313	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	T.D. HARZSTARK, ABRAHAM. 2801 N.W. 47TH TER. BLDG 7 APT 304 LAUDERDALE LAKES FL 33313	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		<input type="checkbox"/>	<input type="checkbox"/>
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP		<input type="checkbox"/>	<input type="checkbox"/>

14. I do 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 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.

CR2E037 (9/96)