

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 22, 2000 8:00 am
Secretary of State

04-22-2000 90063 030 ****61.25

DOCUMENT # 718243

1. Entity Name
LAUDERDALE OAKS CONDOMINIUM 5, INC.

Principal Place of Business 2801 N.W. 47TH TERRACE LAUDERDALE LAKES FL 33313 US	Mailing Address 2801 N.W. 47TH TERRACE LAUDERDALE LAKES FL 33313-1755 US
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DO NOT WRITE IN THIS SPACE

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

4. FEI Number 59-1350952	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent
DONALD, STEFANIC
 2801 N.W. 47TH TERRACE
 LAUDERDALE LAKES FL 33313

7. Name and Address of New Registered Agent
 Name **Roberta R. Miller**
 Street Address (P.O. Box Number is Not Acceptable) **2801 NW 47th Terr # 204**
Lauderdale Lakes,
 City **Florida** FL Zip Code **33313**

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.
Roberta Rancourt Miller
 SIGNATURE **Roberta Rancourt Miller** DATE **4/11/00**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SCHIFF, RITA 2801 NW 47 TERRACE LAUDERDALE LAKES FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SAVATH, SYLVIA 2801 NW 47 TERRACE LAUDERDALE LAKES FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD COPELAND, EDWARD 2801 N.W. 47TH TERRACE LAUDERDALE LAKES FL 33313 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MILLER, ROBERTO 2801 N.W. 47TH TERRACE LAUDERDALE LAKES FL 33313 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD DONALD, STEFANIC 2801 N.W. 47TH TERRACE LAUDERDALE LAKES FL 33313 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KATZ, LARRY 2801 N.W. 47TH TERRACE LAUDERDALE LAKES FL 33313 <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Guy Thivierge #103 <input type="checkbox"/> Change <input type="checkbox"/> Addition 2801 NW 47th Terr Bldg 97 # 103 Lauderdale Lakes, FL 33313
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: **Rita Schiff** **Rita Schiff Pres.** DATE **4/11/00** (954) 485 1975
Signature and typed or printed name of signing officer or director. Date Daytime Phone #

CR2E037 (9/99)