## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Feb 05, 2007 8:00 am Secretary of State

ANNUAL REPORT					Secretary of State			
DOCUMENT # 721715  1. Entity Name MEADOWBROOK TOWERS CONDOMINIUM "J", INC.							90117 044 ****61	
Principal Place of Business 300 N E 12TH AVE. 108 HALLANDALE BEACH, FL 33009		Mailing Address 300 N E 12TH AVE. HALLANDALE BEACH, FL 33009						
2. Principal Place of Business - No P.O. Box # 3.		3. Mailing Address	3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01232007 Chg	g-NP	CR2E037 (12/06)		
City & State		City & State		4. FEI Number 59-1365557	7	<del> +</del> -	oplied For	
Zip	Country	Zip	Country		5. Certificate of Status Desired		\$9.75	ditional
	6. Name and Address of Current	Registered Agent			7. Name and Addre	ess of New F	Registered Agent	
ARANZULŁO, FRED VP 300 NE 12 AVE. APT 106 HALLANDALE BCH., FL 33009				Name Street Address (P.O. Box Number is Not Acceptable)  City  FL Zip Code				
the obligations of registered agent.  Signature  Signature, typed or printed name of registered agent and tille if applicable. (NOTE: Registered Agent signature required)  Filling Fee Is \$61.25  Due by May 1, 2007  P. Election Campaign Financing Trust Fund Contribution.					\$5.00 May Be Added to Fees  Added to Fees			
10.	OFFICERS AND DI	RECTORS	11.		ADDITIONS/CHANGE	S TO OFFICE	RS AND DIRECTORS IN	10
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ARANZULLO, THERESA 300 NE 12 AVE. APT. 108 HALLANDALE, BCH., FL 33009	☐ Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP			0 10 0 1110	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ARANZULLO, FRED 300 NE 12TH AVE. APT. 106 HALLANDALE, BCH., FL 33009	Delete	TITLE NAME STREET ADDRES CITY-ST-2IP	ss			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR ARANZULLO, FRED 300 NE 12TH AVE. HALLANDALE, BCH., FL 33009	☐ Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	\$S.			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC LOOS, ELEANOR 300 NW 12TH AVE HALLANDALE, BCH., FL 33009	☐ Delete	TITLE  NAME  STREET ADDRES  CITY-ST-ZIP	ss			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC LAVERONI, MILDRED 300 NW 12TH AVE HALLANDALE, BCH., FL 33009	☐ Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	SS			☐ Change	Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY+ST-ZIP

BIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

Jan, 29, 2007 954-459-1136

Change

■ Addition