

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # 738614

1. Entity Name

OAKRIDGE "A" CONDOMINIUM ASSOCIATION, INC.



FILED

04 APR 27 PM 3:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

66413155



MOORE CR2E037 (11/03)

Principal Place of Business
C/O COOCVE
3501 WEST DRIVE
DEERFIELD BCH FL 33442-2085

Mailing Address
C/O COOCVE
3501 WEST DRIVE
DEERFIELD BCH FL 33442-2085

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
59-1950768
Applied For
Not Applicable

Zip Country

Zip Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CONDOMINIUM OWNERS ORGANIZ. OF CENT. VILL.
3501 WEST DRIVE
DEERFIELD BEACH FL 33442-2085

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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

**FILE NOW: 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**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D
NAME BERNSTEIN, ZACK
STREET ADDRESS 4013 OAKRIDGE A
CITY-ST-ZIP DEERFIELD BEACH FL 33442 ☐ Delete

TITLE DIRECTOR
NAME SAM GORLICK
STREET ADDRESS 3009 OAKRIDGE A
CITY-ST-ZIP DEERFIELD BEACH FL 33442 ☐ Change ☒ Addition

TITLE DV
NAME STEIN, BILL
STREET ADDRESS OAKRIDGE A 1010
CITY-ST-ZIP DEERFIELD BEACH FL 33442 ☐ Delete

TITLE 800034615408
NAME 04/29/04--01020--001 **15006.25 ☐ Change ☐ Addition

TITLE P + DIRECTOR
NAME MCINROY, ANDREW
STREET ADDRESS 3007 OAKRIDGE A
CITY-ST-ZIP DEERFIELD BEACH FL 33442 ☐ Delete

TITLE PRES. + DIRECTOR
NAME MCINROY, ANDREW
STREET ADDRESS 3007 OAKRIDGE A
CITY-ST-ZIP DEERFIELD BEACH FL 33442 ☒ Change ☐ Addition

TITLE D
NAME LEVITT, LEWIS
STREET ADDRESS 3015 OAKRIDGE A
CITY-ST-ZIP DEERFIELD BEACH FL 33442 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME KOMMIT, PHIL
STREET ADDRESS OAKRIDGE A 1018
CITY-ST-ZIP DEERFIELD BEACH FL 33442 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME MORACHE, GERALD
STREET ADDRESS 3017 OAKRIDGE A
CITY-ST-ZIP DEERFIELD BEACH FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-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: A.J. MCINROY 2/14/04 954 571 9507
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #