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

preseno

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**SIGNATURE:** 

## Apr 19, 2004 8:00 am Secretary of State **DOCUMENT # 743658** 1. Entity Name 04-19-2004 90731 012 \*\*\*\*61.25 LIGHTHOUSE POINT GARDENS NORTH CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 1951 N.E. 39TH STREET LIGHTHOUSE POINT FL 33064 1951 N.E. 39TH STREET LIGHTHOUSE POINT FL 33064 りそりりしりつり 2. Principal Place of Business 3. Mailing Address Suite Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) City & State City & State Applied For 4. FEI Number 59-1201636 Not Applicable Zip Country Zin \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BECKER POLIAKOFF & STREITFELD, P.A. Street Address (P.O. Box Number is Not Acceptable) 3111 STIRLING RD. FT. LAUDERDALE FL 33312 City 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 Signature, typed or printed name of registered agent and litle if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2004 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. ROBURT EARLY 1961 NE 39th ST # 146 DIRECTER Change Addition TITLE Delete Delete TITLE O'SHEA, THOMAS NAME NAME 1951 NE 39 ST. #333 STREET ADDRESS STREET ADDRESS LIGHTHOUSE Pt., FL 33064 LIGHTHOUSE FL 33064 CITY-ST-ZIP CITY-ST-7IP VICE PRESIDENT ☐ Change Addition TITLE TITLE Delete JEANNE D'SHER : DEBUVITZ, JOSEPH NAME NAME 1951 NE 39Th St #373 1951 NE 39TH ST #258 STREET ADDRESS STREET ADDRESS LIGHTHOUSE FL 33064 CITY-ST-ZIP LIGHTHOUSE PT. FL 33064 CITY-ST-ZIP DIRECTOR HOLEGER PATRICIA HOLEGER 1981NE 39TH ST #251 ☐ Addition Delete Change TITLE HOLECEK, PATRICIA NAME NAME 1951 NE 39TH ST. #251 STREET ADDRESS STREET ADDRESS LIGHTHOUSE PT. FL 39064 LIGHTHOUSE FL 33064 CITY-ST-ZIP CITY-ST-7IP PRESIDENT Change ☐ Delete TITLE TITLE ☐ Addition JOHN WOESTEWALD WUESTEWALD, JOHN NAME NAME 1951 N.E 39+45+ #128 1951 NE 39TH ST #128 STREET ADDRESS STREET ADDRESS LIGHTHOUSE FL 33064 LIGHTHOUSE PT. IT 3964 CITY-ST-ZIP CITY-ST-ZIP PIRECTOR ☐ Change Addition Delete TITLE TITLE MURTHA, BARBARA REN me Coort NAME NAME 1951NE 39th St #226 1951 NE 39TH STREET#142 STREET ADDRESS STREET ADDRESS LIGHTHOUSE FL 33064 LIGHTHOUSE PT FL 33064 CITY-ST-ZIP CITY-ST-7IP DIRECTOR ☐ Delete TITLE ☐ Change Addition MCEWAN, GRAHAM CAROL DIAN NAME NAME 1951 N.E 39THST #360 1951 NE 39 ST. #123 STREET ADDRESS STREET ADDRESS LIGHTHOUSE FL 33064 CITY-ST-7IP CITY - ST- ZIP LIGHTHOUSE Pt. FL 33064 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.

4-15-04 Date

Daytime Phone #

**FILED**