

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 31, 2003 8:00 am
Secretary of State

03-31-2003 90281 027 ****61.25

DOCUMENT # 748004

1. Entity Name

LAS OLAS VILLAS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

**1770 E. LAS OLAS BLVD
FT. LAUDERDALE FL 33301
US**

Mailing Address

**1220 MIAMI RD
STE 6
FT. LAUDERDALE FL 33316
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1929060**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**SHOOP, THOMAS V
1220 MIAMI RD
STE 6
FORT LAUDERDALE FL 33316**

7. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

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

T ☐ Delete
NAME **KENDALL, LESTER**
STREET ADDRESS **1770 E LAS OLAS BLVD**
CITY-ST-ZIP **FT LAUDERDALE FL**

D ☒ Delete
NAME **CHAVEZ, HOMER**
STREET ADDRESS **1770 E. LAS OLAS BLVD.**
CITY-ST-ZIP **FT. LAUDERDALE FL**

D ☐ Delete
NAME **FRIEL, DONNA MARIE**
STREET ADDRESS **1770 E LAS OLAS BLVD**
CITY-ST-ZIP **FT LAUDERDALE FL**

D ☐ Delete
NAME **BODIFORD, ALYSSA**
STREET ADDRESS **1770 E. LAS OLAS BLVD.**
CITY-ST-ZIP **FORT LAUDERDALE FL 33301**

D ☐ Delete
NAME **BELLINGHAM, PAUL**
STREET ADDRESS **1770 E. LAS OLAS BLVD.**
CITY-ST-ZIP **FORT LAUDERDALE FL 33301**

D ☐ Delete
NAME **GERBASI, ERNEST**
STREET ADDRESS **1770 E. LAS OLAS BLVD.**
CITY-ST-ZIP **FORT LAUDERDALE FL 33301**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

D ☐ Change ☒ Addition
NAME **PETERSON, BRAD**
STREET ADDRESS **1770 E LAS OLAS BLVD**
CITY-ST-ZIP **FT. LAUDERDALE FL 33301**

PD ☒ Change ☐ Addition
NAME **FRIEL, DONNA MARIE**
STREET ADDRESS **1770 E LAS OLAS BLVD**
CITY-ST-ZIP **FT LADUERDALE FL 33301**

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

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

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

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: *Lester Kendall* **Lester Kendall** 3-27-03 954-462-3530

CR2E037 (10/02)