

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749340

FILED
Apr 01, 2009
Secretary of State

Entity Name: LAUREL OAKS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

20100 BOCA WEST DRIVE
BOCA RATON, FL 33434

New Principal Place of Business:

Current Mailing Address:

20100 BOCA WEST DRIVE
BOCA RATON, FL 33434

New Mailing Address:

FEI Number: 59-1995932 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRAHAM, SHELLY M
20100 BOCA WEST DRIVE OFC
BOCA RATON, FL 33434 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LEVI, BERNARD
Address: 20100 BOCA WEST DRIVE OFC
City-St-Zip: BOCA RATON, FL 33434

Title: VD () Delete
Name: SMITH, PATRICIA
Address: 20100 BOCA WEST DRIVE OFC
City-St-Zip: BOCA RATON, FL 33434

Title: SD () Delete
Name: NOVIN, ELLEN
Address: 20100 BOCA WEST DRIVE OFC
City-St-Zip: BOCA RATON, FL 33434

Title: D () Delete
Name: PATRON, RACHEL
Address: 20110 BOCA W. DR. #231
City-St-Zip: BOCA RATON, FL 33434

Title: TD () Delete
Name: RUBEN, ROBERT
Address: 20100 BOCA WEST DRIVE OFC
City-St-Zip: BOCA RATON, FL 33434

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: LEVI, BERNARD
Address: 20100 BOCA WEST DRIVE OFC
City-St-Zip: BOCA RATON, FL 33434

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: ARNOLD, KIMMEL
Address: 20100 BOCA WEST DRIVE OFC
City-St-Zip: BOCA RATON, FL 33434

Title: D () Change (X) Addition
Name: IRVING, ROSENBERG
Address: 20100 BOCA WEST DRIVE OFC
City-St-Zip: BOCA RATON, FL 33434

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ARNOLD KIMMEL

PD

04/01/2009

Electronic Signature of Signing Officer or Director

_____ Date