

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749340

FILED
Apr 01, 2010
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: TD
Name: LEVI, BERNARD
Address: 20100 BOCA WEST DRIVE OFC
City-St-Zip: BOCA RATON, FL 33434

Title: PD
Name: SMITH, PATRICIA
Address: 20100 BOCA WEST DRIVE OFC
City-St-Zip: BOCA RATON, FL 33434

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

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

Title: D
Name: ARNOLD, KIMMEL
Address: 20100 BOCA WEST DRIVE OFC
City-St-Zip: BOCA RATON, FL 33434

Title: VD
Name: WALTER, LIPKIN
Address: 20090 BOCA WEST DRIVE OFC
City-St-Zip: BOCA RATON, FL 33434

I hereby 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 all other like empowered.

SIGNATURE: PATRICIA SMITH

PD

04/01/2010

Electronic Signature of Signing Officer or Director

Date