Was this sent/paid ?? Now

## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **FILED** Jun 10, 2004 8:00 am Secretary of State

1 Entity Name	e .	# 751426 CONDOMINIUM /	ASSOCIATIO	, N, INC.			* .	06-10-200	4 90001 038 *	****61	.25
Principal Place 4200 NW 3RI PLANTATION,	D COURT	US	Mailing Addre 5310 N SR I FORT LAUDE	7	33319	US			540	570	09
2. Principal Pl	lace of Busine	ess	3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.				04202004	04202004 Chg-NP CR2E037 (10/03)			
City & State	e		City & Stat	te			4. FEI Numl 59-25	04968			plied For ot Applicable
Zip		Country	Zip		Cou	ntry_	5Certificat	e of Status Desired		<b>75</b> Add Required	
	6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent				
ISAACS, G 5465 NOR					Name Of School Man Street Parties IP.O. BOSN Lamber is Not Acceptable						
SUITE D	5	E, FL 33319				050		agen S	KNG		
	/	/			Sinvise			FL 33502			
the obligation	ions of registe	ed agent		/	registere	ed office or re-	gistered agent, or b	oth, in the State of	r Florida. Tam tamil	iiar with,	and accept
the obligation of the state of	ions of registr	ored agent	a and title if applicable.	NAV.	E: Registered	1 Agent signature re	gistered agent, or b	oth, in the State of	5/12/0	J.	
the obliga	Signature, typed of	red agent	rand title if applicable.	rav.	E: Registered	1 Agent signature re	equired when reinstating)	Be	3/12/0	yable to	·
the obliga	Signature, typed of	or o	and title if applicable.	MASS. (NOTI	E: Registered	d Agent signature of inancing on.	s5.00 May Added to Fee	Be F	Make check parlorida Departme	yable tont of St	o tate
signature  Signature  10.  Title  NAME  STREET ADDRESS	Filling Fee Due by M	or printed game or registered eggen e is \$61.25 lay 1, 2004 OFFICERS AND D	erand title if applicable.  9, [	MASS. (NOTI	E: Registered mpaign Fi Contributi  11.  IIILE NAME STREE	d Agent signature in inancing on.	\$5.00 May Added to Fee ADDITIONS/C	Be F HANGES TO OFF	Make check pariorida Departme	yable tont of St TORS IN Change	o tate
signature  Signature  10.  Title  NAME	Filing Fee Due by M  VP FRASER, 5380 PLAN PLANTATI D SHAW, RA 4200 NW	or printed game of registered ages is \$61.25 lay 1, 2004  OFFICERS AND D  WILLIAM NTATION RD ION, FL 33317	gand title if applicable.  9, [	(NOTI	mpaign Fi Contributi  11.  IIILE NAME STREE CITY.  TITLE NAME STREE	I Agent signature in inancing on.	S5.00 May Added to Fee ADDITIONS/C RESUDENTAL ANALYTICAL AIRAM, E	BBO F HANGES TO OFF TYPCK, DO TYPCK,	Make check parlorida Departme	yable tont of St TOPS IN Change Change	o tate
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not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information are and that my signature shall have the same legal effect as if made under oath; that I am an officer or director file this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if 12. I hereby certify that the information indicated on this teport or supplier of the corporation changed, or on a

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

**SIGNATURE** 

TITLE

STREET ADDRESS

CITY-ST-ZIP

Delete

☐ Change

Addition