


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

FILED
Sep 13, 2004 8:00 am
Secretary of State

09-13-2004 90004 029 ****61.25

DOCUMENT # N00000004099			
1. Entity Name REFLECTIONS OF LAS OLAS CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 25 HENDRICKS ISLE FORT LAUDERDALE FL 33301 US		Mailing Address C/O CASTLE MANAGEMENT INC. P.O. BOX 189013 PLANTATION, FL 33318 US	
2. Principal Place of Business		3. Mailing Address 25 HENDRICKS ISLE	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State FORT LAUDERDALE	
Zip	Country	Zip	Country
33301		33301	FLORIDA
6. Name and Address of Current Registered Agent D'ANNA, RONALD ESQ 2300 GLADES ROAD, EAST TOWER SUITE 400 BOCA RATON FL 33431		7. Name and Address of New Registered Agent	
Name		Name	
Street Address (P.O. Box Number is Not Acceptable)		Street Address (P.O. Box Number is Not Acceptable)	
City		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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW: FEE IS \$61.25 Due By May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
		Make Check Payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	PD KLAISLE, WILLIAM <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	25 HENDRICKS ISLE	NAME	
STREET ADDRESS	FORT LAUDERDALE FL 33301	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	SD GOLDMAN, RICHARD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	25 HENDRICKS ISLE #305	NAME	
STREET ADDRESS	FORT LAUDERDALE FL 33301	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	TD NESTO, ROBERT <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	25 HENDRICKS ISLE #403	NAME	
STREET ADDRESS	FORT LAUDERDALE FL 33301	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	



MOORE CR2E037 (11/03)

4. FEI Number **65-1039081** Applied For Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

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: *William H. Hardy, Pres.* **9-8-04** **954-759-3262**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment

September 10, 2004

57072722
#N00000004699

Dear Sirs:

Sorry this filing is late. Our Association took over from the developer and retained a property management company until the start of 2004. We are presently self managed and were not aware of this filing requirement until recently advise by our new accountant.

Sincerely,

William J. Laird, Pres.