

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 20, 2004
Secretary of State**

DOCUMENT# N01000008602

Entity Name: FLAMINGO COMMONS NO. 5 CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

12555 ORANGE DR, STE 100
DAVIE, FL 33330

New Principal Place of Business:

12555 ORANGE DRIVE
SUITE 100
DAVIE, FL 33330 US

Current Mailing Address:

12555 ORANGE DR, STE 100
DAVIE, FL 33330

New Mailing Address:

12555 ORANGE DRIVE
SUITE 100
DAVIE, FL 33330 US

FEI Number: 80-0026903 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZIMMERMAN, HOWARD J
12555 ORANGE DR, STE 100
DAVIE, FL 33330

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: PD () Delete
Name: REIFKIED, ELIOT
Address: 12545 ORANGE DR., SUITE 503
City-St-Zip: DAVIE, FL 33330

Title: SD () Delete
Name: HERSHKOWITZ, VALERIE
Address: 12545 ORANGE DR., SUITE 502
City-St-Zip: DAVIE, FL 33330

Title: D () Delete
Name: MONTAMARTA, FRANCISCO
Address: 12545 ORANGE DRIVE, SUITE 501
City-St-Zip: DAVIE, FL 33330

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: REIFKIED, ELIOT
Address: 12545 ORANGE DR., SUITE 503
City-St-Zip: DAVIE, FL 33330 US

Title: SD (X) Change () Addition
Name: HERSHKOWITZ, VALERIE
Address: 12545 ORANGE DR., SUITE 502
City-St-Zip: DAVIE, FL 33330 US

Title: D (X) Change () Addition
Name: MONTAMARTA, FRANCISCO
Address: 12545 ORANGE DRIVE, SUITE 501
City-St-Zip: DAVIE, FL 33330 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ELIOT REIFKIND

PD

02/20/2004

Electronic Signature of Signing Officer or Director

Date