2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 08, 2007 8:00 am
Secretary of State
03-08-2007 90001 010 ****61.25

DOCUMENT # N02000000751

1. Entity Name
FOURTH GULFSTREAM GARDEN APARTMENTS CONDOMINIUM, INC.

Principal Place of Business	Mailing Address
% LANDMARK MANAGEMENT SERVICES 12323 SW 55TH ST., SUITE 1002 COOPER CITY, FL 33330	% LANDMARK MANAGEMENT SERVICES 12323 SW 55TH ST., SUITE 1002 COOPER CITY, FL 33330

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
c/o Landmark Mg.	c/o Landmark Mg.
Suite, Apt. #, etc. 1941 NW 150 Ave	Suite, Apt. #, etc. 1941 NW 150 Ave
City & State Pembroke Pines	City & State Pembroke Pines Fl.
Zip Fl. 33028 Country USA	Zip 33028 Country USA

02162007 Chg-NP CR2E037 (12/06)

4. FEI Number
59-1434816
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

LANDMARK MANAGEMENT SERVICES
12325 SW 55ST
STE 1002
COOPER CITY, FL 33330

7. Name and Address of New Registered Agent

Name: Steve A. Mason, PA
Street Address (P.O. Box Number is Not Acceptable)
3363 Sheridan St. #201
City: Hollywood FL Zip Code: 33021

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: X [signature] 3/5/07
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$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 / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
✓	PD ALBEKE, M. LORRAINE 410 S.E. 2ND STREET HALLANDALE, FL 33009	☐		☐ ☐
✓	VP TOBIN, ROSALIE 410 S.E. 2ND STREET HALLANDALE, FL 33009	☐		☐ ☐
✓	D O'BRIEN, EDWARD 410 SE 2ND ST #310 HALLANDALE, FL 33009	☐		☐ ☐
✓	SD FINGER, MURIEL 410 S.E. 2ND STREET HALLANDALE, FL 33009	☐		☐ ☐
✓	TD SADOWSKI, LORRAINE 410 S.E. 2ND STREET HALLANDALE, FL 33009	☐		☐ ☐
✓	D KALOGERAKIS, RUBY 410 SE 2ND ST #409 HALLANDALE, FL 33309	☐		☐ ☐

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: M. Lorraine Albeke 2/28/07.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #