

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2004 8:00 am
Secretary of State

03-05-2004 90040 001 ***245.00

DOCUMENT # N96000003144 1. Entity Name LOTUS GARDENS CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 4805 NW 35TH STREET LAUDERDALE LAKES, FL 33319			Mailing Address 4805 NW 35TH STREET LAUDERDALE LAKES, FL 33319		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		02012004 Chg-NP CR2E037 (10/03)	
Zip		Country		4. FEI Number 65-0724351	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent MLM PROPERTY MGMT CORP 9900 W. SAMPLE RD STE 300 POMPANO BEACH, FL 33065			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City		
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: _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)		
Filing Fee is \$61.25 Due by May 1, 2004		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	SD MILLER, JOHN 4805 NW 35TH ST L 409 FORT LAUDERDALE, FL 33319	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD JOAN MALLON 4805 NW 35TH ST. # L-409 LAUDERDALE LAKES, FLA. 33319	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD AUBERTIN, JACQUES 4805 NW 16TH ST LAUDERDALE LAKES, FL 33319	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD QUEULLON, ANDRE 4805 NW 35ST L-611 FORT LAUDERDALE, FL 33319	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD QUEULLON, ANDRE 4805 NW 35ST L-611 FORT LAUDERDALE, FL 33319	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD COLOMBE, CAROL 4805 NW 35TH ST L 406 FORT LAUDERDALE, FL 33319	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D CHARBENRAN, JACQUIN 4805 NW 25 ST L-44 LAUDERDALE, FL 33219	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LISE DENGOLT 4805 NW 35TH ST # L-40 LAUDERDALE LAKES, FLA. 33319	☐ Change ☒ Addition
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: <u>ANDREE QUEVILLON</u> <i>Feb 10-04</i> 954-730-9237 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					