2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2004 08:00 AM
Secretary of State

DOCUMENT # N99000003837

1. Entity Name
VILLAS OF PARK DRIVE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
60 PARK DR. #F BAL HARBOUR, FL 33154	60 PARK DR. #F BAL HARBOUR, FL 33154

01142004 No Chg-NP CR2E037 (10/03)

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4. FEI Number
65-1121602
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

MCCAFFREY, CHARLES G IV
1111 KANE CONCOURSE (96TH ST)
501
BAY HARBOR ISLAND, FL 33154

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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
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

10. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	MCCAFFREY, CHARLES G IV
STREET ADDRESS	60 PARK DR., #B
CITY-ST-ZIP	BAL HARBOUR, FL 33154
TITLE	VSD
NAME	MCCAFFREY, JESSICA CASO
STREET ADDRESS	60 PARK DR. #B
CITY-ST-ZIP	BAY HARBOUR, FL 33154
TITLE	D
NAME	MEIER, LORI
STREET ADDRESS	60 PARK DR C
CITY-ST-ZIP	MIAMI, FL 33154
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/20/04-80066-017 61.25

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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: Charles G McCaffrey 1/14/04 305-992-0746
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #