

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 60 PARK DR. #F BAL HARBOUR, FL 33154	Mailing Address 60 PARK DR. #F BAL HARBOUR, FL 33154
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DO NOT WRITE IN THIS SPACE



01142004 No Chg-NP CR2E037 (10/03)

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

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00** May Be
Added to Fees

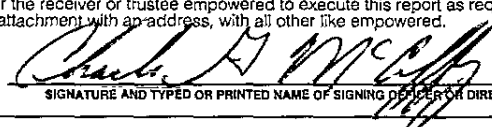
10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD MCCAFFREY, CHARLES G IV 60 PARK DR., #B BAL HARBOUR, FL 33154
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD MCCAFFREY, JESSICA CASO 60 PARK DR. #B BAY HARBOUR, FL 33154
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MEIER, LORI 60 PARK DR C MIAMI, FL 33154
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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)(f), 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:  1/14/04 305-992-0746
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #