

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2001 8:00 am
Secretary of State

02-21-2001 90031 036 ****61.25

0046482

DOCUMENT # 721765

1. Entity Name

LAUDERDALE OAKS CONDOMINIUM XVIII, INC.

Principal Place of Business

2990 N.W. 46TH AVENUE
 LAUDERDALE LAKES FL 33313

Mailing Address

2990 N.W. 46TH AVENUE
 LAUDERDALE LAKES FL 33313

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1374647

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MARSON, PRESLEY F
2990 NW 46 AVE
LAUDERDALE LAKES FL 33313

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2/14/2000

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **~~DIRECTOR~~** ☐ Delete
 NAME **RAYMOND, DAN**
 STREET ADDRESS **2990 NW 46TH AVE**
 CITY-ST-ZIP **LAUDERDALE LKS FL 33313**

TITLE **V.P.** ☐ Change ☒ Addition
 NAME **JACK MURPHY**
 STREET ADDRESS **2990 NW 46 AVE LAUDLKS.**
 CITY-ST-ZIP

TITLE **D** ☐ Delete
 NAME **DOWNING, BILLY**
 STREET ADDRESS **2990 N.W. 46TH AVE**
 CITY-ST-ZIP **LAUDERDALE LAKES FL 33313**

TITLE **DIRECTOR** ☐ Change ☒ Addition
 NAME **AL LA CERBA**
 STREET ADDRESS **2990 N.W. 46 AVE LAUDLKS.**
 CITY-ST-ZIP

TITLE **D** ☐ Delete
 NAME **SILVESTRI, JOSEPH**
 STREET ADDRESS **2990 N.W. 46TH AVE**
 CITY-ST-ZIP **LAUDERDALE LAKES FL 33313**

TITLE **SECRETARY** ☐ Change ☒ Addition
 NAME **RUTH ROCHLIN**
 STREET ADDRESS **2990 N.W. 46 AVE. LAUD LKS.**
 CITY-ST-ZIP

TITLE **~~PRESIDENT.~~** ☐ Delete
 NAME **FLAHERTY, JOE**
 STREET ADDRESS **2990 N.W. 46TH AVE**
 CITY-ST-ZIP **LAUDERDALE LAKES FL 33313**

TITLE **Director Treasurer** ☐ Change ☒ Addition
 NAME **PRESLEY MARSON**
 STREET ADDRESS **2990 NW 46 ave, laud lks**
 CITY-ST-ZIP

TITLE **D** ☒ Delete
 NAME **NOBLE, ANN**
 STREET ADDRESS **2990 N.W. 46TH AVE**
 CITY-ST-ZIP **LAUDERDALE LAKES FL 33313**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** ☐ Delete
 NAME **BERNATH, MIKE**
 STREET ADDRESS **2990 N.W. 46TH AVE.**
 CITY-ST-ZIP **LAUDERDALE LKS FL 33313**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Joseph F. Flaherty **PRESIDENT** *2/14/01* **954-486-9749**

CR2E037 (10/00)