FILED

## **2002 UNIFORM BUSINESS REPORT (UBR)**

## **DOCUMENT # 718505**

1. Entity Name

## LAUDERDALE MANORS HOME OWNERS ASSOCIATION, INC.

			,				04-23-2002 301	12 057	70	.00	
Principal Pla	ce of Business	Mailing A	ddress								
1340 CHATEAU PARK DRIVE FT. LAUDERDALE FL 33311 US US  2. Principal Place of Business 3. Ma		PO BOX 5 FT LAUDE	/O LAUD. MANORS HOMEOWNERS ASSOC. INC. O BOX 5471 T LAUDERDALE FL 33310 S Mailing Address Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE					
		3. Mailing									
		Suite,									
City & State			City & State			4. FEI Number 59-1713295 Applied For Not Applicable					
Zip Country		Zip		Country	5.	Certificate of	Status Desired		75 Add	ditional	
	6. Name and Address of Current	Registered A	gent		7.	Name and Ac	dress of New Regist		<u> </u>		
<u> </u>				Name							
WILSON, PATRICE 1512 NW 17 ST				Street /	Street Address (P.O. Box Number is Not Acceptable)						
FT. LAUDERDALE FL 33311				City				FL Zip Code			
SIGNATURE	Signature, typed or printed name of registered agent	tegistered Agent signal									
					— Adde	tu to rees	Depar	tment of	State	!	
10.	OFFICERS AND DIF	RECTORS		11.	ADDIT	IONS/CHAN	SES TO OFFICERS AN	ID DIRECTO	ORS IN	10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COOPER, BRIEN 2001 NW 14TH AVENUE		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		NM 15.	TERRALE		hange	<b>∑</b> Addition	
TITLE NAME	FT LAUDERDALE FL 33311 P GOLDSBY, MARSHA		☐ Delete	TITLE NAME	D Ethel t	ed FL tarley			hange	Addition	
STREET ADDRESS CITY-ST-ZIP	FT. LAUDERDALE FL 33311			STREET ADDRESS CITY-ST-ZIP	FTLA		STREET 33311				
TITLE NAME	VD CHANGE, ROSETTA		Delete	TITLE *NAME	Edga_	Elijah	<u></u>	C	hange	Addition	
STREET ADDRESS CITY-ST-ZIP	1544 NW 19 AVE FT LAUDERDALE FL 33311		·	STREET ADDRESS CITY-ST-ZIP	1524	UD PL	COURT				
TITLE NAME	t Goldsby, Sheila		☐ Delete	TITLE NAME	DE	+ Hug	·	¥c	hange	☐ Addition	
STREET ADDRESS	1708 NW 18TH ST			STREET ADDRESS	1320	מ נאנא	Ίςτ				

FT LAUD FL 33311 FT LAUDERDALE FL 33311 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.

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

FT LAUDERDALE FL 33311

BAKER, CHARLES

MOORE, PATRICIA

1716 NW 18TH STREET

FORT LAUDERDALE FL 33311

1716 LAUDER DALE MANORS DR

Marilla THE LEAR DIMOTSha SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Delete** 

☐ Delete

1320 NW AI ST

Larry Williams 3516 NW 42 ST

Lauderdale Lakes

1808 NW 15 COURT

Patricia Bailey

DELETE

FT LAUD PL 33311

President 4

ノニア

Change

Change

33309

☐ Addition

Addition

AHachshert 355964 Dr.# 718505

Delete: Robert Hughes Larry Williams

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