

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 11, 2004 8:00 am
Secretary of State

02-11-2004 90011 023 ****61.25

DOCUMENT # 746725

1. Entity Name

**MEADOWBROOK LAKES CONDOMINIUM APARTMENTS,
BUILDING #14, INC.**



Principal Place of Business

**1025 SOUTHEAST 4TH AVENUE
DANIA BEACH FL 33004**

Mailing Address

**1025 SE 4TH AVE
APT. 307
DANIA BEACH FL 33004-5252**

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

59-2055376

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

**JUAN ABELLA
1025 SE 4TH AVE, # 201
DANIA BEACH FL 33004**

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. 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)

DATE

**FILE NOW: 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

TITLE PD ☐ Delete
NAME AIUDI, RUGERE W
STREET ADDRESS 1025 SE 4TH AVE. APT. 402
CITY-ST-ZIP DANIA BEACH FL 33004

TITLE VPD ☒ Delete
NAME ~~RASUSA, FRANCES~~
STREET ADDRESS 1025 SE 4TH AVE. APT. 307
CITY-ST-ZIP DANIA BEACH FL 33004

TITLE T ☐ Delete
NAME ABELLA, JUAN
STREET ADDRESS 1025 SE 4TH AVE. APT. 401
CITY-ST-ZIP DANIA BEACH FL 33004

TITLE SD ☐ Delete
NAME STRECHLE, EVAVON
STREET ADDRESS 1025 SE 4TH AVE. APT. 408
CITY-ST-ZIP DANIA BEACH FL 33004

TITLE 2VPD ☐ Delete
NAME BOUCHARD, PAUL
STREET ADDRESS 1025 SE 4TH AVE. APT. 202
CITY-ST-ZIP DANIA BEACH FL 33004

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE ☐ Change ☐ Addition
NAME V.P.
STREET ADDRESS Jim Dunlevy
CITY-ST-ZIP 1025 SE 4th Ave apt 305

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

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

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

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 #

2-4-04

954 9208859