

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 27, 2006 8:00 am**  
**Secretary of State**

03-27-2006 90282 043 \*\*\*\*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

1st MOORE

CR2E037 (10/05)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HOLODAK, EDWARD  
2500 HOLLYWOOD BLVD SUITE #212  
HOLLYWOOD FL 33020**

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, 2006**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE ☐ Delete  
NAME VP  
STREET ADDRESS DUNLEVY, JIM  
CITY-ST-ZIP 1025 SE 4 AVE., SPT. 305  
DANIA BEACH FL 33004

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

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

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

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

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

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

TITLE ☒ Change ☐ Addition  
NAME 2VPD  
STREET ADDRESS RUTH BELLO  
CITY-ST-ZIP 1025 SE 4TH AVE. #105  
DANIA, FL 33004

TITLE ☐ Delete  
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 exemptions contained in Section 119, 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:

*Eva von Strehle* EVA VON STREHLE, SEC. 2-7-06 905-794-9402

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #