FILED
Jun 30, 2003 8:00 am
Secretary of State
03-17-2003 90079 017 ****61.25

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 747169

1. Entity Name
WOODLAKE APARTMENTS CONDOMINIUM ASSOCIATION, INC.

[redacted]

55050245

[redacted]

Principal Place of Business	Mailing Address
462 GOLDEN ISLES DRIVE HALLANDALE FL 33009	462 GOLDEN ISLES DRIVE HALLANDALE FL 33009

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 59-2181402 ☐ 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
BRAGONIER, JAMES 462 GOLDEN ISLES DR. UNIT #311 HALLANDALE FL 33009	Name: James Brewer Street Address (P.O. Box Number is Not Acceptable): 462 Golden Isles Dr #308 Hallandale Beach, FL 33009 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: James [signature] 5/07/03
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

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: D NAME: VASIK, GANEA STREET ADDRESS: 462 GOLDEN ISLES DRIVE, #107 CITY-ST-ZIP: HALLANDALE FL 33009	☑ Delete	TITLE: P NAME: John Ayk Lotte STREET ADDRESS: 462 Golden Isles Dr #108 CITY-ST-ZIP: Hallandale Beach, FL 33009	☑ Change ☐ Addition
TITLE: S NAME: LOVERN, MICHAEL STREET ADDRESS: 462 GOLDEN ISLES DRIVEM #209 CITY-ST-ZIP: HALLANDALE FL 33009	☑ Delete	TITLE: NAME: VASIK, GANEA STREET ADDRESS: 462 Golden Isles DR. #107 CITY-ST-ZIP: Hallandale Beach FL 33009	☐ Change ☐ Addition
TITLE: VP NAME: ALDERMAN, JERRY STREET ADDRESS: 462 GOLDEN ISLES DRIVE #102 CITY-ST-ZIP: HALLANDALE FL 33009	☑ Delete	TITLE: VP NAME: Kevin Carmichael STREET ADDRESS: 462 Golden Isles Dr #207 CITY-ST-ZIP: Hallandale Beach, FL 33009	☑ Change ☐ Addition
TITLE: T NAME: REICHL, MARY A STREET ADDRESS: 462 GOLDEN ISLES DR. #307 CITY-ST-ZIP: HALLANDALE FL 33009	☑ Delete	TITLE: NAME: Levrault Borin STREET ADDRESS: 462 Golden Isles Dr. #208 CITY-ST-ZIP: Hallandale Beach, FL 33009	☐ Change ☐ Addition
TITLE: D NAME: HAMEL, YVON STREET ADDRESS: 462 GOLDEN ISLES DR. #204 CITY-ST-ZIP: HALLANDALE FL 33009	☑ Delete	TITLE: SEC NAME: Michael Lovern STREET ADDRESS: 462 Golden Isles Dr# 209 CITY-ST-ZIP: Hallandale Beach, FL 33009	☑ Change ☐ Addition
TITLE: PD NAME: BRAGONIER, JAMES STREET ADDRESS: 462 GOLDEN ISLES DRIVE #210 CITY-ST-ZIP: HALLANDALE FL 33009	☑ Delete	TITLE: TREAS NAME: Maria Hoffman STREET ADDRESS: 462 Golden Isles Dr #211 CITY-ST-ZIP: Hallandale Beach FL 33009	☑ Change ☐ Addition

CR2E037 (10/02)

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] SIGNATURE REQUIRED 03/28/03 (954)455-9483
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #