

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 718243

**Entity Name:** LAUDERDALE OAKS CONDOMINIUM 5, INC.

**FILED**  
**Feb 26, 2020**  
**Secretary of State**  
**7944690433CC**

**Current Principal Place of Business:**

LAUDERDALE OAKS, CONDO 5, INC  
2801 NW 47TH TERRACE  
LAUDERDALE LAKES, FL 33313

**Current Mailing Address:**

LAUDERDALE OAKS, CONDO 5, INC.  
2801 NW 47TH TERRACE  
LAUDERDALE LAKES, FL 33313 US

**FEI Number: 59-1350952**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

LECLERC, ROBERT PRESIDENT  
LAUDERDALE OAKS, CONDO 5, INC.  
2801 NW 47TH TERRACE APT. 102  
LAUDERDALE LAKES, FL 33313 US

*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: ROBERT LECLERC**

**02/26/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title S  
Name COTE, NICOLE  
Address 2801 N.W. 47TH TERRACE #301  
City-State-Zip: LAUDERDALE LAKES FL 33313

Title D  
Name CARRIERE, JACQUES  
Address 2801 N.W. 47TH TERRACE #303  
City-State-Zip: LAUDERDALE LAKES FL 33313

Title D  
Name SIMONEAU, PIERRE  
Address 2801 N.W. 47TH TERR #209  
City-State-Zip: LAUDERDALE LAKES FL 33313

Title TREASURER.  
Name VÉZINA, ISABELLE  
Address 2801 N.W. 47TH TERRACE #209  
City-State-Zip: LAUDERDALE LAKES FL 33313

Title DIRECTOR  
Name LEBLANC, DENISE  
Address LAUDERDALE OAKS, CONDO 5, INC  
2801 NW 47TH TERRACE #408 #408  
City-State-Zip: LAUDERDALE LAKES FL 33313

Title DIRECTOR  
Name HENRICHON, ELAINE  
Address 2801 NW 47TH TERRACE # 406  
LAUDERDALE LAKES 406  
City-State-Zip: FORT LAUDERDALE FL 33313

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE: NICOLE COTE**

**SECRETARY**

**02/26/2020**

Electronic Signature of Signing Officer/Director Detail

Date