

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 718243

Entity Name: LAUDERDALE OAKS CONDOMINIUM 5, INC.

FILED
Feb 04, 2021
Secretary of State
0741618845CC

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

02/04/2021

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

Title DIRECTOR
Name BOURASSA, STEVE
Address 2801 NW 47TH TERRACE
LAUDERDALE OAKS CONDO V INC.
APT. 402
City-State-Zip: LAUDERDALE LAKES 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

02/04/2021

Electronic Signature of Signing Officer/Director Detail

Date