

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 733672

**FILED**  
**Jan 16, 2016**  
**Secretary of State**  
**CC0127204598**

**Entity Name:** PARADISE GARDENS SECTION FOUR MAINTENANCE CORPORATION, INC.

**Current Principal Place of Business:**

7700 MARGATE BLVD  
CLUB HOUSE  
MARGATE, FL 33063

**Current Mailing Address:**

7700 MARGATE BLVD  
CLUB HOUSE  
MARGATE, FL 33063

**FEI Number: 59-1807378**

**Certificate of Status Desired: No**

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

BAGAN, EUGENE  
7445 NW 7TH COURT  
MARGATE, FL 33063 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: EUGENE BAGAN**

**01/16/2016**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           LAING, SHELLEY  
Address        7465 NW 7TH COURT  
City-State-Zip: MARGATE FL 33063

Title           PRESIDENT  
Name           BAGAN, EUGENE  
Address        7445 NW 7TH COURT  
City-State-Zip: MARGATE FL 33063

Title           DIRECTOR  
Name           ARMENO, EUGENE  
Address        7495 NW 7TH COURT  
City-State-Zip: MARGATE FL 33063

Title           DIRECTOR  
Name           KOOPMAN, EDWARD  
Address        1160 NW 74TH AVE  
City-State-Zip: MARGATE FL 33063

Title           DIRECTOR  
Name           MCALVIN, JOHN  
Address        1045NW 73RD AVE  
City-State-Zip: MARGATE FL 33063

Title           2ND VICE PRESIDENT  
Name           EDWARDS, PETER  
Address        1165 NW 72ND TERR  
City-State-Zip: MARGATE FL 33063

Title           DIRECTOR  
Name           HOHWALD, JAMES F  
Address        7530 MARGATE BLVD  
City-State-Zip: MARGATE FL 33063

Title           1ST VICE PRESIDENT  
Name           COUTO, CARLOS  
Address        1060 NW 74TH AVENUE  
City-State-Zip: MARGATE FL 33063

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*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: SHELLEY LAING**

**TREASURER**

**01/16/2016**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name BARONE, ANTHONY  
Address 7350 NW 8TH STREET  
City-State-Zip: MARGATE FL 33063

Title FINANCIAL SECRETARY  
Name JOINER, CLAUDIA  
Address 1055 NW 72ND TERRACE  
City-State-Zip: MARGATE FL 33063

Title SECRETARY  
Name RAFEEK, RYHANA  
Address 1035 N ROCK ISLAND RD  
City-State-Zip: MARGATE FL 33063

Title DIRECTOR  
Name REILLY, GAIL  
Address 7320 NW 8TH STREET  
City-State-Zip: MARGATE FL 33063

Title CFO  
Name KWAAK, ROBERT  
Address 725 NW 73RD TERRACE  
City-State-Zip: MARGATE FL 33063