

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 179616

Entity Name: LAS OLAS APARTMENTS, INC.

Current Principal Place of Business:

C/O PAUL S. HAMMOND
2 HENDRICKS ISLE APT A-1
FT LAUDERDALE, FL 33301

Current Mailing Address:

C/O PAUL S. HAMMOND
2 HENDRICKS ISLE APT. A-1
FORT LAUDERDALE, FL 33301 US

FEI Number: 59-0998954

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HAMMOND, PAUL SANDS
2 HENDRICKS ISLE
APT. A-1
FORT LAUDERDALE, FL 33301 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: PAUL S. HAMMOND

03/08/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title S/D
Name KATSIVALIS, PATRICIA
Address 190 S. WOOD DALE RD.
City-State-Zip: WOOD DALE IL 60191

Title P/D
Name HAMMOND, PAUL SANDS
Address 2 HENCRIKKS ISLE
APT. A-1
City-State-Zip: FORT LAUDERDALE FL 33301

Title VP/D
Name HARTMANN, KAREN
Address 1541 W. HENDERRSON
UNIT J
City-State-Zip: CHICAGO IL 60657

Title D
Name MAZZUCCO, DOLORES
Address 1400 HARTFORD TPKE.
#34
City-State-Zip: NO. HAVEN CT 06473

Title T/D
Name KUHAR, LUDWIG
Address 901 SHERWOOD PL.
City-State-Zip: JOLIET IL 60435

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PAUL S HAMMOND

PRESIDENT

03/08/2023

Electronic Signature of Signing Officer/Director Detail

Date