2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 05, 2002 8:00 am
Secretary of State
03-05-2002 90071 046 ***150.00

DOCUMENT # 256281

1. Entity Name
RO-LEN LAKE GARDENS "F" CORPORATION

Principal Place of Business	Mailing Address
714 S W 11TH AVE HALLANDALE FL 33009	714 S W 11TH AVE HALLANDALE FL 33009

DO NOT WRITE IN THIS SPACE

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

4. FEI Number 59-0966885 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

~~SHARANO, OLIVIA~~
725 SW 11TH AVENUE
~~APT F-18~~
HALLANDALE FL 33009

7. Name and Address of New Registered Agent

Name JOEL BENSLEY
Street Address (P.O. Box Number is Not Acceptable) 725 SW 11 AVE #17
City HALLANDALE FL Zip Code 33009

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.

SIGNATURE X _____ DATE 1/24/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After May 1, 2002 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BOUCHARD, LISE 725 SW 11 AVE F11 HALLANDALE FL 33009	☐ Delete	BRUSCINO, YOLANDA 725 SW 11 AVE F-8 HALLANDALE FL	☒ Change ☐ Addition S/T/D
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MANDEVILLE, J 725 SW 11 AVE F7 HALLANDALE FL 33009	☒ Delete	JEAN GUY GOUILLARD 725 S.W. 11 AVE HALLANDALE, FL 33009	☐ Change ☒ Addition D
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MARCELLA, FRANK 725 SW 11 AVE F2 HALLANDALE FL 33009	☐ Delete	JOEL BENSLEY 725 SW 11 AVE HALLANDALE, FL 33009	☐ Change ☒ Addition D
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD FLEURETTE, ROCK 725 SW 11 AVE F 18 HALLANDALE FL	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PROULX, ROBERT 725 S.W. 11 AVE F-20 HALLANDALE FL	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LOKKEN, MARY 725 SW 11 AVE F9 HALLANDALE FL 33009	☐ Delete		☐ Change ☐ Addition

CR2E034 (9/01)

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: LISE BOUCHARD Lise Bouchard 01/17/2001 954-456-9559
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #