


**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 16, 2006 8:00 am**  
**Secretary of State**

03-16-2006 90240 043 \*\*\*\*61.25

**DOCUMENT # 714094**  
 1. Entity Name  
**BRADLEY HALL CONDOMINIUM CORP., INC.**



Principal Place of Business  
**LAUDERHILL TEN MGMT. CORP.**  
**4311 NW 16 ST**  
**LAUDERHILL, FL 33313 US**

Mailing Address  
**LAUDERHILL TEN MGMT. CORP.**  
**4311 NW 16 ST**  
**LAUDERHILL, FL 33313 US**

400500



2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

02152006 Chg-NP CR2E037 (11/05)

City & State

4. FEI Number  
**59-1319726**

Applied For  
 Not Applicable

Zip Country Zip Country

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

6. Name and Address of Current Registered Agent  
**LEMIRE, REINE G**  
**4301 N.W. 16TH ST.**  
**LAUDERHILL, FL 33313**

7. Name and Address of New Registered Agent  
 Name **MINKLEY, AUDREY**  
 Street Address (P.O. Box Number is Not Acceptable)  
**4301 N.W. 16TH ST**  
 City **LAUDERHILL FL** Zip Code **33313**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Audrey Minkley **AUDREY MINKLEY, CAM** **2/27/06**  
Signature, typed or printed name of agent and trust applicable. (NOTE: Registered Agent signature required when consulting) DATE

**Filing Fee is \$61.25**  
**Due by May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

**Make check payable to Florida Department of State**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>ROSSEAU, MARCEL</b> <b>4311 NW 16TH ST, B 205</b> <b>LAUDERHILL, FL 33313</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP</b> <b>THORNQUIST, GAIL</b> <b>4311 NW 16TH STREET B-209</b> <b>LAUDERHILL, FL 33313</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>PROULX, PAULINE</b> <b>4311 NW 16TH STREET B-110</b> <b>LAUDERHILL, FL 33313</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>CHABOR, JEAN</b> <b>4311 NW 16T ST, B-201</b> <b>LAUDERHILL, FL 33313</b> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>ST</b> <b>ROY, JEAN-GUY</b> <b>4311 NW 16TH STREET B-104</b> <b>LAUDERHILL, FL 33313</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>CHABOT, JEAN</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>4311 NW 16TH STREET, #B-201</b> <b>LAUDERHILL, FL 33313</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: Marcel Rousseau **MARCEL ROUSSEAU** **3/8/06**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

954-733-1922