

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 04, 2006 8:00 am
Secretary of State

08-04-2006 90015 044 ****61.25

DOCUMENT # 715950

1. Entity Name
**RO-MONT GARDENS ANDOVER CONDOMINIUM "E",
INC.**



Principal Place of Business
**51 N.E. 204TH STREET
#E99
MIAMI, FL 33179**

Mailing Address
**51 N.E. 204TH STREET
#E99
MIAMI, FL 33179**

50024157



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07102006

Chg-NP

CR2E037 (4/06)

City & State

City & State

4. FEI Number

59-1459209

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

**KORDUBA, ENID
51 N.E. 204TH ST.
#23
MIAMI, FL 33179**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by September 6, 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 PD ☐ Delete
NAME KORDUBA, ENID
STREET ADDRESS 51 N.E. 204TH STREET
CITY-ST-ZIP MIAMI, FL 33179

TITLE VD ☐ Delete
NAME LAVOIE, JULES
STREET ADDRESS 51 NE 204 ST
CITY-ST-ZIP MIAMI, FL 33179

TITLE SD ☒ Delete
NAME DONATO, SOL
STREET ADDRESS 51 NE 204 ST
CITY-ST-ZIP MIAMI, FL 33179

TITLE T ☐ Delete
NAME OVERHOLTZER, BEATRICE
STREET ADDRESS 51 NE 204TH ST.
CITY-ST-ZIP MIAMI, FL 33179

TITLE TD ☐ Delete
NAME GIARAMITA, JACKIE
STREET ADDRESS 51 NE 204TH STREET
CITY-ST-ZIP MIAMI, FL 33179

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD ☐ Change ☒ Addition
NAME SWANSON-MASSA, GLENDA
STREET ADDRESS 51 NE 204 ST
CITY-ST-ZIP MIAMI, FL 33179

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Enid P. Korduba
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7-19-06

305 651 0424