

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 23, 2004 8:00 am**  
**Secretary of State**

08-23-2004 90026 022 \*\*\*\*61.25

**DOCUMENT # 716275**

1. Entity Name  
**PARK SOUTH TEN, INC. A CONDOMINIUM**



Principal Place of Business  
**1280 N. W. 43RD AVENUE  
LAUDERHILL, FL 33313**

Mailing Address  
**1280 N. W. 43RD AVENUE  
LAUDERHILL, FL 33313**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

07052004 Chg-NP CR2E037 (10/03)

4. FEI Number  
**59-1319750**

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FLOYD, POE** -- **John J. Ciccone**  
**1280 NW 43RD AVE  
APT 203 - 202  
LAUDERHILL, FL 33313**

Name **John J. Ciccone**  
Street Address (P.O. Box Number is Not Acceptable)  
**1280 N.W. 43rd Avenue #202**  
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 **John J. Ciccone**

**August 20<sup>th</sup> - 2004**

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 8, 2004

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Delete  
NAME FLOYD, POE  
STREET ADDRESS 1280 NW 43RD AVE APT 203  
CITY-ST-ZIP LAUDERHILL, FL 33313

TITLE **PRESIDENT** ☒ Change ☐ Addition  
NAME **John J. Ciccone**  
STREET ADDRESS **1280 N.W. 43rd Avenue Apt 202**  
CITY-ST-ZIP **LAUDERHILL, FL 33313**

TITLE D ☒ Delete  
NAME GRAY-LAREAU, MARIELLE  
STREET ADDRESS 1280 NW 42ND AVE APT 207  
CITY-ST-ZIP FORT LAUDERDALE, FL 33313

TITLE **VICE-PRESIDENT** ☒ Change ☒ Addition  
NAME **GERARD SILVERA**  
STREET ADDRESS **1280 N.W. 43rd Avenue Apt 103**  
CITY-ST-ZIP **Lauderhill, FL 33313**

TITLE VTD ☒ Delete  
NAME SAUCIER, J R  
STREET ADDRESS 1280 NW 43RD AVE #207  
CITY-ST-ZIP LAUDERHILL, FL 33313

TITLE **DIRECTOR** ☐ Change ☒ Addition  
NAME **PANSY M. McDERMOTT**  
STREET ADDRESS **1280 N.W. 43rd Avenue Apt 101**  
CITY-ST-ZIP **Lauderhill, FL 33313**

TITLE D ☒ Delete  
NAME GANG, HENRY  
STREET ADDRESS 1280 N.W. 43RD AVENUE, APT. 107  
CITY-ST-ZIP LAUDERHILL, FL 33313

TITLE **DIRECTOR** ☐ Change ☒ Addition  
NAME **GARY GRAY**  
STREET ADDRESS **7809 GOLF CIRCLE DR #311**  
CITY-ST-ZIP **MARGATE, FL 33306**

TITLE D ☐ Delete  
NAME CICCONI, JOHN  
STREET ADDRESS 1280 NW 43RD AVE APT 202  
CITY-ST-ZIP LAUDERHILL, FL 33313

TITLE **ANDRE BISAILLON, Director** ☐ Change ☒ Addition  
NAME **ANDRE BISAILLON**  
STREET ADDRESS **1280 N.W. 43rd Ave #104**  
CITY-ST-ZIP **LAUDERHILL, FL 33313**

TITLE D ☐ Delete  
NAME SILVERA, GERALD  
STREET ADDRESS 1280 NW 43RD AVE APT 103  
CITY-ST-ZIP FORT LAUDERDALE, FL 33313

TITLE **DIRECTOR-TREASURER** ☐ Change ☒ Addition  
NAME **DOROTHY H. KENNEDY**  
STREET ADDRESS **1310 NW 43rd Ave #209**  
CITY-ST-ZIP **Lauderhill, FL 33313**

12. 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 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: **John J. Ciccone**

**08-20, 2004**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Print

Daytime Phone #