

2001 UNIFORM BUSINESS REPORT (UBR)

1/

FILED
Feb 26, 2001 8:00 am
Secretary of State

01-29-2001 90195 031 ***61.25

DOCUMENT # 716418
 1. Entity Name
GERANIUM GARDENS CONDOMINIUM, INC.

Principal Place of Business Mailing Address
5041 WEST OAKLAND PARK DRIVE **5041 WEST OAKLAND PARK DRIVE**
LAUDERDALE LAKES FL 33313 **LAUDERDALE LAKES FL 33313**

2. Principal Place of Business 3. Mailing Address
5041 W OAKLAND PK DRIVE **5041 OAKLAND PK DRIVE**
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
LAUDERDALE LAKES FL **LAUDERDALE LAKES, FL.**
 Zip Country Zip Country
33313 **BROWARD** **33313** **BROWARD**

4. FEI Number Applied For
59-1372758 Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
BERNIER, RUTH
5071 W OAKLAND PARK BLVD
G311
LAUDERDALE LAKES FL 33313

7. Name and Address of New Registered Agent
 Name **WILLIAM F. SPILLANE**
 Street Address (P.O. Box Number is Not Acceptable)
5071 WEST OAKLAND PARK BLVD
UNIT G110
 City **LAUDERDALE LAKES** 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.
 SIGNATURE *William F. Spillane* DATE **02/14/01**
Signature, typed or printed name of registered agent and trust, if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME	DVP BORRELLO, FRANK	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	5071 W OAKLAND PK BLVD	
CITY-ST-ZIP	LAUDERDALE LAKES FL 33313	
TITLE NAME	P BERNIER, RUTH	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	5071 W OAKLAND PK BLVD	
CITY-ST-ZIP	LAUDERDALE LAKES FL-33313	
TITLE NAME	D BORRELLO, FRANK	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	5071 W. OAKLAND BLVD	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE NAME	T SPILLANE, WILLIAM	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	5071 W. OAKLAND PARK BLVD. G110	
CITY-ST-ZIP	LAUDERDALE LAKES FL 33313	
TITLE NAME	D BRIARD, CLAUDE MR	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	Y MONTREAL QUEBEC H3M-2J8Y	
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME	D.V.P. CLAUDE BRIARD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	5071 W. OAKLAND PK BLVD - G 307	
CITY-ST-ZIP	LAUDERDALE LAKES FL 33313	
TITLE NAME	P WILLIAM F. SPILLANE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	5071 W. OAKLAND PK. BLVD, - G 110	
CITY-ST-ZIP	LAUDERDALE LAKES, FL. 33313	
TITLE NAME	T PAMELA FREDERICKS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	5071 W. OAKLAND PARK BLVD - G 309	
CITY-ST-ZIP	LAUDERDALE LAKES, FL. 33313	
TITLE NAME	D JUDY SMITH JAUBERT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	5071 W. OAKLAND PK BLVD - G 112	
CITY-ST-ZIP	LAUDERDALE LAKES FL 33313	
TITLE NAME	D SYLVIA FEINMAN	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	5071 W OAKLAND PK. BLVD G 202	
CITY-ST-ZIP	LAUDERDALE LAKES FL 33313	
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		

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: *William F. Spillane, President* DATE: **02/11/01** DAYTIME PHONE: **954-739-5912**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR. Date Daytime Phone #

CR2E037 (10/00)