## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#717880** 

FILED Feb 15, 2011 Secretary of State

Entity Name: LAUDERDALE OAKS CONDOMINIUM III, INC.

Current Principal Place of Business: New Principal Place of Business:

2900 NW 47TH TERRACE 2900 NW 47TH TERRACE

LAUDERDALE LAKES, FL 33313 LAUDERDALE LAKES, FL 333131719

Current Mailing Address: New Mailing Address:

2900 NW 47TH TERRACE 2900 NW 47TH TERRACE

LAUDERDALE LAKES, FL 33313 LAUDERDALE LAKES, FL 333131719

FEI Number: 65-0214019 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CLAY, SR, GEORGE BLAINE CLAY, SR, GEORGE BLAINE 2900 NW 47TH TER. 2900 NW 47TH TER.

UNIT 102 UNIT 102

LAUDERDALE LAKES, FL 33313 US LAUDERDALE LAKES, FL 333131719 US

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: CLAY, SR. 02/15/2011

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: F

Name: TSEKOS, BASILE Address: 342 RUE DU GOLF

City-St-Zip: ILE BIZARD, QC H9C 2X2 OC

Title: VP

Name: MORIN, MAURICE Address: 192 RUE MOREL

City-St-Zip: REPENTIGNY, QC J6A 3G3 OC

Title: T

Name: HENRIQUES, FERNANDO

Address: 2900 N.W. 47TH TERRACE, UNIT 104 City-St-Zip: LAUDERDALE LAKES, FL 333131719

Title: S

Name: CLAY, GEORGE B SR.

Address: 2900 N.W. 47TH TERRACE, UNIT 102 City-St-Zip: LAUDERDALE LAKES, FL 333131719

Title: A T

Name: HENRIQUES, FERNANDO

Address: 2900 N.W. 47TH TERRACE, UNIT 104 City-St-Zip: LAUDERDALE LAKES, FL 333131719

Title: D

Name: ALLEYNE, PENELOPE

Address: 2900 N.W. 47TH TERRACE, UNIT 203 City-St-Zip: LAUDERDALE LAKES, FL 333131719

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: CLAY, SR. S 02/15/2011