


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2005 8:00 am
Secretary of State

01-24-2005 90052 014 ****61.25

DOCUMENT # 718209
 1. Entity Name
NARCISSUS GARDENS CONDOMINIUM, INC.



Principal Place of Business
 7100 W COMMERCIAL BLVD
 SUITE 107
 LAUDERHILL, FL 33319 US

Mailing Address
 7100 W COMMERCIAL BLVD
 SUITE 107
 LAUDERHILL, FL 33319 US

50005737



2. Principal Place of Business Suite, Apt. #, etc.
 3. Mailing Address Suite, Apt. #, etc.

01062005 Chg-NP CR2E037 (10/03)

City & State

4. FEI Number
59-1372611

Applied For
 Not Applicable

City & State

Zip Country Zip Country

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

6. Name and Address of Current Registered Agent
AMBASSADOR COMMUNITY MANAGEMENT INC
7100 W COMMERCIAL BLVD
SUITE 107
LAUDERHILL, FL 33319

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2005

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 **VPD** Delete
 NAME **WADDY, RONALD**
 STREET ADDRESS **5151 W OAKLAND PD BLVD**
 CITY-ST-ZIP **FORT LAUDERDALE, FL 33319**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **PD** Delete
 NAME **PRAVATO, KATHLEEN**
 STREET ADDRESS **5151 W OAKLAND PD BLVD**
 CITY-ST-ZIP **LAUDERDALE LAKES, FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **TD** Delete
 NAME **NICOSIA, JOSEPHINE**
 STREET ADDRESS **5151 WD. OAKLAND PARK BLVD #305**
 CITY-ST-ZIP **FORT LAUDERDALE, FL 33319**

TITLE **TD** Change Addition
 NAME **Butterworth, Charles**
 STREET ADDRESS **5151 W. Oakland Park Blvd # 309**
 CITY-ST-ZIP **Lauderdale Lakes, Fl. 33313**

TITLE **SD** Delete
 NAME **LOUIS, MARIE PIERRE**
 STREET ADDRESS **5151 W. OAKLAND PARK BLVD 301**
 CITY-ST-ZIP **LAUDERDALE LAKES, FL 33319**

TITLE **SD** Change Addition
 NAME **Maisel, Judy**
 STREET ADDRESS **5151 W. Oakland Park Blvd # 110**
 CITY-ST-ZIP **Lauderdale Lakes, Fl. 33313**

TITLE **VPD** Delete
 NAME **CHRUST, MARILYN**
 STREET ADDRESS **5151 W OAKLAND PARK BLVD # 311**
 CITY-ST-ZIP **LAUDERDALE LAKES, FL 33313**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 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 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: Kathleen Pravato _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____ Daytime Phone # _____