

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 718260

FILED  
Feb 03, 2010  
Secretary of State

**Entity Name:** LAUDERDALE OAKS CONDOMINIUM 7, INC.

**Current Principal Place of Business:**

2861 N.W. 47TH TERRACE  
FT. LAUDERDALE, FL 33313

**New Principal Place of Business:**

2861 NW 47TH TERRACE  
LAUDERDALE LAKES, FL 33313

**Current Mailing Address:**

LAUDERDALE OAKS CONDO VII ASSOCIATION, INC  
2861 NW 47TH TERRACE  
LAUDERDALE LAKES, FL 3313

**New Mailing Address:**

LAUDERDALE OAKS CONDOMINIUM 7, INC.  
2861 NW 47TH TERRACE  
LAUDERDALE LAKES, FL 33313

FEI Number: 59-1357421

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SACHS SAX AND CAPLAN  
611 BROKEN SOUND PARKWAY  
SUITE 200  
BOCA RATON, FL 33487 US

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

ASSOCIATED CORPORATE SERVICES  
6111 BROKEN SOUND PARKWAY  
SUITE 200  
BOCA RATON, FL 33487 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: LOUIS CAPLAN, ESQ.

02/03/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: ZORBAS, GUS  
Address: 2861 NW 47TH TERRACE, APT. 306  
City-St-Zip: LAUDERDALE LAKES, FL 33313

Title: VPD  
Name: JOLICOEUR, GABRIEL  
Address: 2861 NW 47TH TERRACE, APT. 108  
City-St-Zip: LAUDERDALE LAKES, FL 33313

Title: TD  
Name: FORTIER, PIERRE  
Address: 2861 NW 47TH TERRACE, APT. 401  
City-St-Zip: LAUDERDAL LAKES, FL 33313

Title: TAD  
Name: THIBERT, HUGUETTE  
Address: 2861 NW 47TH TERRACE, APT. 109  
City-St-Zip: LAUDERDALE LAKES, FL 33313

Title: SD  
Name: FONTAINE, HUGUETTE  
Address: 2861 NW 47TH TERRACE, APT. 103  
City-St-Zip: LAUDERDALE LAKES, FL 33313

Title: D2  
Name: REJEAN FOURNIER, ANDRE LEROUX  
Address: 2861 NW 47TH TERRACE  
City-St-Zip: LAUDERDALE LAKES, FL 33313

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: GUS ZORBAS

PD

02/03/2010

Electronic Signature of Signing Officer or Director

Date