

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 01, 2006 8:00 am**  
**Secretary of State**

03-01-2006 90026 036 \*\*\*\*70.00

**DOCUMENT # 718505**

1. Entity Name

**LAUDERDALE MANORS HOME OWNERS ASSOCIATION, INC.**



Principal Place of Business

**LAUDERDALE MANOR RECREATION CENTER  
1340 CHATEAU PARK DRIVE  
FT. LAUDERDALE FL 33311  
US**

Mailing Address

**C/O LAUD. MANORS HOMEOWNERS ASSOC. IN  
PO BOX 5471  
FT LAUDERDALE FL 33310  
US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E037 (10/05)

City & State

City & State

4. FEI Number

**59-1713295**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**JONES, CHRISTINE  
1600 NW 15 PL  
FT. LAUDERDALE FL 33311**

Name

**Dennis Ulmer**

Street Address (P.O. Box Number is Not Acceptable)

**1007 NW 11th Place**

City

**Ft Land**

FL

Zip Code

**33311**

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

**Dennis Ulmer**

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent Signature required when re-stating)

**2/16/06**

DATE

**FILE NOW: FEE IS \$61.25  
Due By May 1, 2006**

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 ☐ Delete  
NAME **P**  
STREET ADDRESS **ELIJAH, EDNA**  
CITY-ST-ZIP **1524 NW 12 CT.  
FT LAUDERDALE FL 33311**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Delete  
NAME **V**  
STREET ADDRESS **DEAN, INEZ**  
CITY-ST-ZIP **1518 NW 12TH ST.  
FT. LAUDERDALE FL 33311**

TITLE ☒ Change ☐ Addition  
NAME **Bernadette Harding**  
STREET ADDRESS **1601 NW 14th Ct. S**  
CITY-ST-ZIP **Ft. Land. Fl. 33311**

TITLE ☐ Delete  
NAME **D**  
STREET ADDRESS **ARBURARY, HENRY**  
CITY-ST-ZIP **1642 N.W. 14TH STREET  
FT LAUDERDALE FL 33311**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME **T**  
STREET ADDRESS **CONNIE, BAILEY**  
CITY-ST-ZIP **1172 NW 15TH STREET  
MIAMI FL 33111**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME **D**  
STREET ADDRESS **GOODEN, DOROTHY**  
CITY-ST-ZIP **1418 NW 11TH PLACE  
FORT LAUDERDALE FL 33311**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME **D**  
STREET ADDRESS **FOSTER, FAYE**  
CITY-ST-ZIP **2000 N.W. 11TH AVENUE  
FT LAUDERDALE FL 33311**

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 exemptions contained in Section 119, 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: **Edna Elijah**

**2-16-06 954-522-6683**