

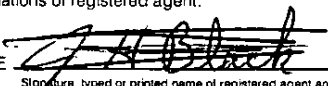
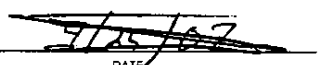
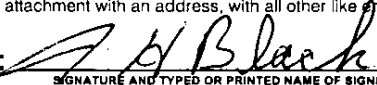


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2008 8:00 am
Secretary of State

05-02-2008 90311 001 ***578.75

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| DOCUMENT # 719063 1. Entity Name LAUDERDALE OAKS CONDOMINIUM 4, INC. | | | |  | |
| Principal Place of Business 2800 N.W. 47TH TERRACE LAUDERDALE LAKES, FL 33313 | | | Mailing Address % CASTLE MANAGEMENT, INC P.O. BOX 189013 PLANTATION, FL 33318 | | |
| 2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. | | 3. Mailing Address C/O CASTLE GROUP P.O. BOX 559009 | |  | |
| City & State City & State FORT LAUDERDALE, FL | | 4. FEI Number 59-1357424 | | Applied For Not Applicable | |
| Zip 33355 | Country | Zip 33355 | Country | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent CIRIANO, ESTELLE 2800 N.W. 47TH TERRACE APT. 304 LAUDERDALE LAKES, FL 33313 | | | | 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div> | |
| 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  (NOTE: Registered Agent signature required when reinstating)  DATE | | | | | |
| Filing Fee is \$61.25 Due by May 1, 2008 | | 9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | | \$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 NAME STREET ADDRESS CITY-ST-ZIP | PD BLACK, JAMES 2800 NW 47 TERRACE #210 LAUDERDALE, FL | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | D FERRARA, SALVATORE 2800 NW 47TH TERRACE #306 LAUDERDALE LAKES, FL 33313 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D CHRISTOPHER, ANGELA 2800 NW 47 TERRACE # 3070 LANDERDALE LAKES, FL | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | D CANTIN, PIERRE 2800 NW 47TH TERRACE #407 LAUDERDALE LAKES, FL 33313 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VD ST. CHARLES, FRANCOISE 2800 NW 47TH TERR LAUDERDALE LAKES, FL 33313 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | D ZORBAS, KOSTAS 2800 NW 47TH TERRACE #308 LAUDERDALE LAKES, FL 33313 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D CAHAN, VICTOR 2800 NW 47 TERRACE LAUDERDALE LAKES, FL 33313 | <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | D ROBBA, JOHN 2800 NW 47TH TERRACE #209 LAUDERDALE LAKES, FL 33313 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | STD CIRIANO, ESTELLE 2800 NE 47TH TERRACE LAUDERDALE LAKES, FL 33313 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D FERLAND, ROGER 2800 N.W. 47TH TERR. LAUDERDALE LAKES, FL 33313 | <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | D GRAJALES, CAROLYN 2800 NW 47TH TERRACE #406 LAUDERDALE LAKES, FL 33313 | |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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:  | | | 4/25/08 Date Daytime Phone # | | |