

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 18, 2004 8:00 am
Secretary of State

06-18-2004 90002 007 ****61.25

DOCUMENT # 719249

1. Entity Name

MIAMI LAKES GOLF COURSE VILLAGE HOMEOWNERS'
ASSOCIATION, NO. 13, INC.



Principal Place of Business

7381 BIG CYPRESS CT
MIAMI LAKES FL 33014
US

Mailing Address

7381 BIG CYPRESS CT
MIAMI LAKES FL 33014
US

03007344

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2376040

Applied For

Not Applicable

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

MARTINEZ, JOSE
7381 BIG CYPRESS CT
MIAMI LAKES FL 33014

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

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 PD
NAME MARTINEZ, JOSE ☐ Delete
STREET ADDRESS 7381 BIG CYPRESS CT
CITY-ST-ZIP MIAMI LAKES FL 33014

TITLE *D Eileen Casawite* ☐ Change ☒ Addition
NAME *Eileen Casawite*
STREET ADDRESS *7427 Big Cypress Pl*
CITY-ST-ZIP *Miami Lakes FL 33014*

TITLE VD
NAME WARNER, WILLIAM ☐ Delete
STREET ADDRESS 7342 BIG CYPRESS DR
CITY-ST-ZIP MIAMI LAKES FL 33014

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

TITLE TD
NAME ALVAREZ, ILIANA ☐ Delete
STREET ADDRESS 7362 BIG CYPRESS DR
CITY-ST-ZIP MIAMI LAKES FL 33014

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

TITLE SD
NAME HOWARD, SANDRA ☐ Delete
STREET ADDRESS 7426 BIG CYPRESS DR
CITY-ST-ZIP MIAMI LAKES FL 33014

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

TITLE D
NAME STRAUSS, JOEL ☐ Delete
STREET ADDRESS 7425 BIG CYPRESS DR
CITY-ST-ZIP MIAMI LAKES FL 33014

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

TITLE D ☒ Delete
NAME MALINOWSKI, EILEEN
STREET ADDRESS 7325 BIG CYPRESS DR
CITY-ST-ZIP MIAMI LAKES FL 33014

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #