

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2008 8:00 am
Secretary of State

04-21-2008 90073 023 ****61.25

DOCUMENT # 721765 1. Entity Name LAUDERDALE OAKS CONDOMINIUM XVIII, INC.					
Principal Place of Business 2990 N.W. 46TH AVENUE LAUDERDALE LAKES, FL 33313			Mailing Address 2990 N.W. 46TH AVENUE LAUDERDALE LAKES, FL 33313		
2. Principal Place of Business - No P.O. Box # Phoenix Management Services 4800 N. State Road 7, #105 Lauderdale Lakes, FL		3. Mailing Address Same As Item 2 Suite, Apt. #, etc. City & State			
Zip 33319 Country		Zip Country		03272008 Chg-NP CR2E037 (12/06)	
4. FEI Number 59-1374647				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ALMONTE, FABIO 2990 NW 46 AVE APT. 207 LAUDERDALE LAKES, FL 33313			7. Name and Address of New Registered Agent Name Brough, Chadrow & Levine, P.A. 1900 North Commerce Parkway Weston, FL City FL Zip Code 33326		
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 <u><i>[Signature]</i></u> DATE <u>4/15/08</u> <small>Signature, typed or printed name of registered agent and trust, if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
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	D BOHUSLAV, NORMA 2990 N.W. 46 AVE APT #213 LAUDERDALE LKS, FL 33313	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Max Davila III 2990 NW 46 Ave., #211 Lauderdale Lakes, FL 33313	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KATES, LENORE 2990 NW 46 AVE LAUDERDALE LKS, FL 33313	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD Jim Walden 2990 NW 46 Ave. Lauderdale Lakes, FL 33313	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SILVESTRI, JOSEPH 2990 N.W. 46TH AVE LAUDERDALE LAKES, FL 33313	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Lance Deen 2990 NW 46 Ave. Lauderdale Lakes, FL 33313	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NEUMAN, PETER 2990 N.W. 46 AVE APT #112 LAUDERHILL LKS, FL 33313	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Blandell Lake-Rice 2990 NW 46 Ave. Lauderdale Lakes, FL 33313	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ALMONTE, FABIO 2990 N.W. 46 AVE APT #207 LAUDERHILL LKS, FL 33313	<input checked="" 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	VP JARRETT, CASTELL 2990 N.W. 46 AVE APT #201 LAUDERHILL LKS, FL 33313	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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 as an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>[Signature]</i></u>			Date <u>April 15, 2008</u> Daytime Phone # <u>934/707-3330</u>		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					