-2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Mar 23, 2005 8:00 am **Secretary of State DOCUMENT # 724271** 1. Entity Name 03-23-2005 90035 023 ****70.00 LUDLUM LAKE ASSOCIATION INC. Principal Place of Business Mailing Address 6703 N.W. 169TH STREET HIALEAH FL 33015 6703 N.W. 169TH STREET HIALEAH FL 33015 2. Principal Place of Business 3. Mailing Address SAME SAME Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (10/04) City & State City & State Applied For 4. FEI Number 59-1418726 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SAME POLIAKOFF, GARY A Street Address (P.O. Box Number is Not Acceptable) 3111 STIRLING ROAD FORT LAUDERDALE FL 33312 City 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 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Due By May 1, 2005 Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE Delete TITLE XI Change ☐ Addition SAENZ, GINA NAME NAME MORELLI, FERRUCCIO 6705 NW 169TH ST. C-101 STREET ADDRESS STREET ADDRESS 6701 NW 169th STREET, B-205 HIALEAH FL 33015 CITY-ST-ZIP CITY-ST-ZIP HIALEAH, FL 330<u>15</u> TITLE X Delete MAX 5 C. RODRIGUEZ, JOSE NAME NAME MAJAIL, MARIA C. 6705 NW 169TH ST. C101 STREET ADDRESS STREET ADDRESS 6705 NW 169th STREET, C-203 HIALEAH FL 33015 CITY-ST-7IP CITY-ST-7IP HIALEAH, FL 33015 TD TITLE ☐ Delete X Addition TITLE CROST, RICHARD NAME NAME ROSALES, RIGOBERTO 6701 NW 169TH ST. B-301 STREET ADDRESS STREET ADDRESS 6705 NW 169th STREET, C 211 HIALEAH FL 33015 CITY-ST-7IP CITY-ST-7IP HIALEAH, FL 33015 TITLE X Delete TITLE Change X Addition LACERA, ANTONIO NAME NAME MORELLI, MARIA Q. 6705 N.W. 169TH ST C-109 STREET ADDRESS STREET ADDRESS 6701 NW 169th STREET, B-205 HIALEAH FL 33015 CITY-ST-7IP CITY-ST-7IP HIALEAH, FL 33015 TITLE ☐ Defete TITLE Change ☐ Addition COBELO, FRANK NAME NAME 6701 NW 169TH ST. B-302 STREET ADDRESS STREET ADDRESS HIALEAH FL 33015 CITY-ST-ZIP CITY-ST-7IP TITLE X Delete TITLÉ - Change ☐ Addition MORELLI, FERRUCCIO NAME NAME 6701 NW 169TH STREET, B-205 STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33-3015

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 ceport 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 empow

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

FILED

relli, PRESIDENT 3/18/05 305-822-6392