

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724671

FILED
Jan 05, 2007
Secretary of State

Entity Name: LAUDERDALE WEST COMMUNITY ASSOCIATION NO. 1, INC.

Current Principal Place of Business:

1141 NW 85TH AVENUE
PLANTATION, FL 33322

New Principal Place of Business:

Current Mailing Address:

1141 NW 85TH AVENUE
PLANTATION, FL 33322

New Mailing Address:

FEI Number: 59-1655434

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAPLAN, LOU
SACHS, SAZ, & KLEIN
301 YAMATO RD
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PATE, SUSAN R
Address: 1070 NW 89 AVENUE
City-St-Zip: PLANTATION, FL 33322

Title: V () Delete
Name: GAVRON, RICHARD
Address: 8525 NW 12 STREET
City-St-Zip: PLANTATION, FL 33322

Title: V () Delete
Name: PESCATORE, CATHERINE
Address: 9040 NW 10 COURT
City-St-Zip: PLANTATION, FL 33322

Title: T () Delete
Name: HEINIG, ABE
Address: 1431 NW 86 LANE
City-St-Zip: PLANTATION, FL 33322

Title: S (X) Delete
Name: MARCUS, ARLINE
Address: 1081 NW 88 AVE
City-St-Zip: PLANTATION, FL 33322

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: PESCATORE, CATHERINE
Address: 9040 NW 10 COURT
City-St-Zip: PLANTATION, FL 33322

Title: T (X) Change () Addition
Name: HEINIG, ABE
Address: 1431 NW 86 LANE
City-St-Zip: PLANTATION, FL 33322

Title: S (X) Change () Addition
Name: MARCUS, ARLINE
Address: 1081 NW 88 AVENUE
City-St-Zip: PLANTATION, FL 33322

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUSAN R. PATE

PRES

01/05/2007

Electronic Signature of Signing Officer or Director

Date