2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #725651

1. Entity Name FRENCH QUARTER CONDOMINIUM PHASE IV, INC.



FILED
May 16, 2007 8:00 am
Secretary of State
05-16-2007 90170 001 ***545.00

Principal Place of Business 408 N. W. 70TH AVE. PLANTATION, FL 33317-7550			Mailing Address 4780 N. STATE RD. 7. #E-250 LAUDERDALE LAKES, FL 33319								MID. A. 1884	
2. Principal Pl	lace of Busin	ness - No P.O. Box #	3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.					01152007	Chg-NP	CR2E03	37 (12/06)	
City & State			City & State					4. FEI Numb 59-146				oplied For ot Applicable
Zip		Country	Zip Coun			ıntry		5. Certificate of Status Desired \$8.75 Additional Fee Required				
6. Name and Address of Current I				Registered Agent			7. Name and Address of New Registered Agent					
						Name						
PHOENIX MANAGEMENT SERVICES, INC. 4780 N. STATE ROAD 7, #E250 LAUDERDALE LAKES, FL 33329						Street Address (P.O. Box Number is Not Acceptable)						
					City				FL	Zip Cod	e	
9 The above	nomed potit	u submits this statement (s	e the even	ann of shanning its	rogintor	ad affine as	. nainta		u. :_ u C		4	
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 remission) DATE												
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		3. Election Campaign Financing Trust Fund Contribution.			\$5.00 May 6 Added to Fees		Make checi Florida Depar					
10.		OFFICERS AND DIE	RECTORS		11.			ADDITIONS/CH	ANGES TO OF	FICERS AND DI	RECTORS IN	10
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NAME	VAN DUSEN, CYNTHIA				HAME CR.			WEERD, (24001E			İ
STREET ADORESS	l	9TH AVENUE, #274	1									
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NAME	BELL, JOYCE			NA)		E	2110	rea, Tim	19. a. # 1	79		
STREET ADDRESS :	282 NW 69TH AVENUE, #277 PLANTATION, FL 33317				1	ET ADDRESS -ST-ZIP	207	700067	, E/ ~	-		
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NAME	SILVER,	TINA			NAM		Bel	1, Jouce	,		E Gillongo	
STREET ADDRESS	l	9TH AVENUE, #279			STRE	ET ADDRESS	182	1, Joyce	AUE #	277		
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CITY-ST-ZIP		<u></u>			מוא	-ST-ZIP	PLa	NTUTION	J, FL	333/7		
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NAME OTRECT ADORESC					NAM	E Et adoress	1					
STREET ADORESS City-St-Zip						-ST-ZIP						
	entify that th	e information cumuliars with	this files	does not qualify to			natained	Lin Chantar 110	Borido Statut	toe I further east	ihi that the i-	
12. Thereby certify that the information supplied with this fiting 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 cor	poration or the	he receiver or trustee empe achment with an address.	owered to	execute this report per like empowered	as requi	red by Cha	pter 617	7, Florida Statute	es; and that my	name appears i	n Block 10 o	r Block 11 if
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SIGNATURE: