

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 04, 2007 8:00 am
Secretary of State

05-04-2007 90082 037 ****61.25

DOCUMENT # 725751	
1. Entity Name	
PARK COURT CONDOMINIUM APARTMENTS INC	

Principal Place of Business	Mailing Address
611 N.E. 14TH AVENUE FORT LAUDERDALE FL 33304	611 N.E. 14TH AVENUE, #305 FORT LAUDERDALE FL 33304



2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

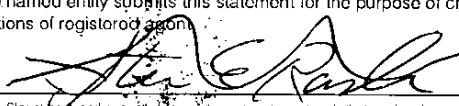
1st MOORE CR2E037 (10/06)

City & State	City & State
Zip	Country

4. FEI Number	Applied For
59-1590937	Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent	
RASK, STEVE 611 N.E. 14TH AVENUE, #305 FORT LAUDERDALE FL 33304	

7. Name and Address of New Registered Agent	
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 	DATE
(NOTE: Registered Agent signature required when consulting)	

FILE NOW: FEE IS \$61.25 Due By May 1, 2007	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
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10. OFFICERS AND DIRECTORS	
TITLE	<input type="checkbox"/> Delete
NAME	STEPHENS, JENNIFER
STREET ADDRESS	611 N.E. 14TH AVENUE #401
CITY ST-ZIP	FORT LAUDERDALE FL 33304
TITLE	<input type="checkbox"/> Delete
NAME	STAFFORD, JEFF
STREET ADDRESS	611 N.E. 14TH AVENUE, #205
CITY ST-ZIP	FORT LAUDERDALE FL 33304
TITLE	<input type="checkbox"/> Delete
NAME	TS
STREET ADDRESS	RASK, STEVE
CITY ST-ZIP	611 N.E. 14TH AVENUE #305 FORT LAUDERDALE FL 33304
TITLE	<input type="checkbox"/> Delete
NAME	D
STREET ADDRESS	VANDERPOOL, MARY ANN
CITY ST-ZIP	611 NE 14 AVE #104 FORT LAUDERDALE FL 33304
TITLE	<input type="checkbox"/> Delete
NAME	D
STREET ADDRESS	RASPEN, JOHN
CITY ST-ZIP	611 NE 14TH AVE #204 FORT LAUDERDALE FL 33304
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	VP
STREET ADDRESS	JULIE JACOBS
CITY ST-ZIP	611 NE 14 AVENUE #105 FORT LAUDERDALE FLORIDA 33304
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DIRECTOR
STREET ADDRESS	JEFF Hiett
CITY ST-ZIP	611 NE 14 AVENUE #404 FORT LAUDERDALE FLORIDA 33304
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 on an attachment with an address, with all other like empowered.

SIGNATURE:  **4/23/07 (54) 523-6769**