

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90271 001 ***306.25

DOCUMENT # 726030

1. Entity Name
QUINCE GARDENS CONDOMINIUM INC



Principal Place of Business
**C/O HAWAIIAN GARDENS PHASE 7
4705 N.W. 35TH STREET
LAUDERDALE LAKES, FL 33319**

Mailing Address
**C/O HAWAIIAN GARDENS PHASE 7
4705 N.W. 35TH STREET
LAUDERDALE LAKES, FL 33319**

66013592



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01052006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number
59-1508153

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HAWAIIAN GARDENS PHASE 7 ASSOCIATION
4705 N.W. 35TH STREET
LAUDERDALE LAKES, FL 33319**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$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
VD
HAMEL, MAURICE
3500 N W 48TH AVENUE
LAUDERDALE LAKES, FL 33319 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
JUBINVILLE, JEANNETTE
3500 N W 48TH AVENUE
LAUDERDALE LAKES, FL 33319 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
GAUTHIER, ROBERT
3500 NW 48TH AVE
LAUDERDALE LAKES, FL 33319 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD **CLARA GOMEZ**
3500 NW 48 AVENUE
LAUDERDALE LAKES FL 33319 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
MATTALIANO, ROSE
3500 N W 48TH AVENUE
LAUDERDALE LAKES, FL 33319 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
GOMEZ, CLARA
3500 NW 48TH AVE
LAUDERDALE LAKES, FL 33319 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T- **LLETTE BOUCHARD**
3500 NW 48 AVENUE
LAUDERDALE LAKES FL 33319 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ 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 on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #