

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2001 8:00 am
Secretary of State

03-06-2001 90295 047 ****61.25

DOCUMENT # 728481

1. Entity Name

THE MEADOWS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

**377 SW 56TH AVENUE
MARGATE FL 33068**

Mailing Address

**377 SW 56TH AVENUE
MARGATE FL 33068**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1532044

Applied For

Not Applicable

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

**POLIFKAFF, GARY A
EMERALD LAKE COPORATE PARK
3111 STIRLING RD
FT. LAUDERDALE FL 33312**

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.

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
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME HARTMAN, RICHARD J.
STREET ADDRESS 5641 SW 2 CT
CITY-ST-ZIP MARGATE FL

TITLE D ☐ Change ☒ Addition
NAME CHARLES BEAULIEU
STREET ADDRESS 5621 SW 2 CT 204
CITY-ST-ZIP MARGATE FL

TITLE VPD ☐ Delete
NAME ANDUJAR, JOSE
STREET ADDRESS 375 SW 56TH AVE 109
CITY-ST-ZIP MARGATE FL

TITLE D ☐ Change ☒ Addition
NAME JEAN CLAUDE GAUDETTE
STREET ADDRESS 375 SW 56 AVE 210
CITY-ST-ZIP MARGATE FL

TITLE TD ☐ Delete
NAME LAVOIE, RAYMOND
STREET ADDRESS 5680 SW 3 PLACE
CITY-ST-ZIP MARGATE FL

TITLE D ☐ Change ☒ Addition
NAME ROMEO LEDUC
STREET ADDRESS 5640 SW 3 PL 116
CITY-ST-ZIP MARGATE FL

TITLE SD ☐ Delete
NAME CORRENTI, CAROL
STREET ADDRESS 5640 S.W. 3RD PLACE 201
CITY-ST-ZIP MARGATE FL

TITLE D ☐ Change ☒ Addition
NAME BERNICE RANFT
STREET ADDRESS 5661 SW 2 CT 116
CITY-ST-ZIP MARGATE FL

TITLE D ☐ Delete
NAME BOUNDREAU, GASTON
STREET ADDRESS 5681 SW 2 CT
CITY-ST-ZIP MARGATE FL

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

TITLE D ☒ Delete
NAME CHARETTE, ANDRE
STREET ADDRESS 5621 SW 2 CT
CITY-ST-ZIP MARGATE FL

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

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 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:

Richard J. Hartman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/1/2001

Daytime Phone #

954-972-3583

CR2E037 (10/00)