

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728894

FILED
Mar 14, 2007
Secretary of State

Entity Name: NICOLE APARTMENTS, INC.

Current Principal Place of Business:

1105 SOUTH G ST
LAKE WORTH, FL 33461

New Principal Place of Business:

Current Mailing Address:

20 THURLOW DR
BOYNTON BEACH, FL 33426

New Mailing Address:

FEI Number: 59-2165894

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERSAUD, SURRENDRA
2885 CAMBRIDGE RD.
LANTANA, FL 33462 US

Name and Address of New Registered Agent:

PERSAUD, SURRENDRA
3309 WHITE BLOSSOM LANE
CLERMONT, FL 34711 US

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: SURRENDRA PERSAUD

03/14/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PERSAUD, SURRENDRA
Address: 2885 CAMBRIDGE RD.
City-St-Zip: LANTANA, FL 33462

Title: STD () Delete
Name: CAMEJO, KIMBERLY
Address: 20 THURLOW DR
City-St-Zip: BOYNTON BEACH, FL 33426

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PERSAUD, SURRENDRA
Address: 3309 WHITE BLOSSOM LANE
City-St-Zip: CLERMONT, FL 34711

Title: T (X) Change () Addition
Name: CAMEJO, KIMBERLY
Address: 20 THURLOW DR
City-St-Zip: BOYNTON BEACH, FL 33426

Title: V () Change (X) Addition
Name: JACKSON, PAUL
Address: 240 NW 17 AVE
City-St-Zip: BOYNTON BEACH, FL 33435

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: KIMBERLY CAMEJO

T

03/14/2007

Electronic Signature of Signing Officer or Director

Date