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

Feb 02, 2007 8:00 am **DOCUMENT # 731085** Secretary of State 1. Entity Name 02-02-2007 90008 029 ****61.25 MARLBORO ESTATES CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 4169 SW 67 AVE. 4169 SW 67 AVE. **DAVIE FL 33314** DAVIE FL 33314 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, otc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) City & State City & State 4. FEI Number Applied For 59-1799292 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name COLANGELO, ANGELO Stre - * * dress (P.O. Box Number is Not Acceptable) 4169 SW 67 AVE. **DAVIE FL 33314** Ciiv Zip Code 8. The above named antity 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 except the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable INOTE: Registered Agent signature regured when registaling? DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be \Box Trust Fund Contribution. Due By May 1, 2007 Added to Fees Florida Department of State 10, OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 HH ☐ Detete HILL Change ■ Addition RAFAEL, TOM 1824 N.W. 108 AUE NAMI COLANGELO, ANGELO NAMI STREET ADDRESS STREET ADORESS 4169 SW 67TH AVE APT 208A CHY SEZIP **DAVIE FL 33314** CHY ST ZIP PLANTATION, FL. 33322 ☐ Change Addition 71111 Z Detete DILLE SHERRILL, DOROTHY E. NAMI COLANGELO, ANGELO NAME ONLY 11941 S.W. 11CT. STREET ADORESS STREET ADDRESS 4169 SW 67TH AVE #208A DAVIE, FL 33325 CHY-ST 7IP CHY ST-ZP **DAWIE FL 33314** ☐ Delete ☐ Change Addition NAM! NAME FULLER, JUNE STELES ADDRESS ວິກີແຕ່ ໄກ່ກີກີກ່ເວລ 2901 SW 871H AVE: #402 CHY ST ZIP CHY ST 7IP DAVIE FL 33328 HILL Delete HILL Change Addition SD NAMI KNOX, HARVEY MAMA STREET ADDRESS STREET ADDRESS 4163 SW 67TH AVE APT 102C CHY ST 7IP CHY ST ZIP FORT LAUDERDALE FL 33314 11114 **X** Delete HILLE ☐ Change Addition NAME FULLER, JUNE NAME 0414 SIDEFL ADDRESS STREET ADDRESS 2901 SW 87TH AVE 402 CITY ST ZIP CITY ST 74P DAVIE FL 33328 MILE Delete ШП (Change Addition NAME NAME ARMSTRONG, ERNESTINE STREET ADDRESS STREET ADDRESS 4165 SW 67TH AVE APT 112B **DAVIE FL 33314** CITY-ST-ZIP

FILED

SIGNATURE: Junglo Calcupt PRESIDENT 1/19/07 954-309-4732

12. I hereby certify that the information supplied with this filling 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 logal effect as if made under eath; 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 13 if changed, or on an attachment with an address, with all other like empowered.