

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 24, 2003 8:00 am
Secretary of State

03-24-2003 91013 020 ****61.25

DOCUMENT # 731669

1. Entity Name

MEADOWBROOK LAKES CONDOMINIUM
APARTMENTS BLDG #3, INC.



DO NOT WRITE IN THIS SPACE

10046531

2. Principal Place of Business
206 SE 10TH ST

3. Mailing Address
206 SE 10 ST

Suite, Apt. #, etc.
#401

Suite, Apt. #, etc.
#401

DO NOT WRITE IN THIS SPACE

City & State
DANIA BEACH, FL

City & State
DANIA BEACH, FL

4. FEI Number 59-1603458

Applied For
Not Applicable

Zip
33004

Country
BROWARD

Zip
33004

Country
BROWARD

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name MS. NORMA CONNOR

Street Address (P.O. Box Number is Not Acceptable)

206 SE 10TH ST #401

City DANIA BEACH

FL

Zip Code
33004

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

Norma D. Connor

March 20, 2003

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FEE IS \$61.25
Initial or Amended UBR

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES - D DES JARDIN, GUY 206 SE 10TH ST #204 DANIA BCH FL 33004
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP - D MENARD, RON 206 SE 10TH ST #108 DANIA BEACH FL 33004
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC - D CONNOR, NORMA 206 SE 10TH ST #401 DANIA BEACH FL 33004
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREAS - D GALVIN, JACKIE 206 SE 10TH ST DANIA BEACH FL 33004
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIR MOREL, JEAN GUY 206 SE 10TH ST DANIA BEACH FL 33004
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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Norma D. Connor

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 20, 03 954 929-0658

Date

Daytime Phone

CR2E037B (12/02)