

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 19, 2004 8:00 am**  
**Secretary of State**

02-06-2004 90026 041 \*\*\*\*61.25

<b>DOCUMENT # 735097</b> 1. Entity Name <b>VILLAS OF SHERIDAN CONDOMINIUM ASSOCIATION, INC.</b>																																																																									
Principal Place of Business <b>3600 N 39 ST HOLLYWOOD FL 33021 US</b>			Mailing Address <b>2530 N 38 AVE HOLLYWOOD FL 33021 US</b>																																																																						
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 <b>59-1690491</b> <div style="float: right;"> <input type="checkbox"/> Applied For  <input type="checkbox"/> Not Applicable         </div>																																																																					
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75</b> Additional Fee Required																																																																					
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent																																																																						
<b>KALITAR, STEVE 2532 N 38 AVE HOLLYWOOD FL 33021</b>			Name <b>FRAN WHITING</b> Street Address (P.O. Box Number is Not Acceptable) <b>3909 SHERIDAN ST.</b> <b>HOLLYWOOD</b> City <b>FLORIDA</b> <span style="float: right;">FL Zip Code <b>33021</b></span>																																																																						
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.																																																																									
SIGNATURE <u>EVELYN LANCE Evelyn Lance Treasurer Jan 30-04</u> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>																																																																									
<b>FILE NOW: FEE IS \$61.25</b> <b>Due By May 1, 2004</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees																																																																					
<b>Make Check Payable to Florida Department of State</b>																																																																									
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <b>10. OFFICERS AND DIRECTORS</b> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 85%;"> <b>PD KALITAR, STEVE</b> <input checked="" type="checkbox"/> Delete         </td> </tr> <tr> <td>STREET ADDRESS</td> <td><b>2532 N 38 AVE</b></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td><b>HOLLYWOOD FL 33021</b></td> </tr> <tr> <td>TITLE</td> <td> <b>DV TAMKIN, STEVE</b> <input checked="" type="checkbox"/> Delete         </td> </tr> <tr> <td>STREET ADDRESS</td> <td><b>2542 N 38TH AVE</b></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td><b>HOLLYWOOD FL 33021</b></td> </tr> <tr> <td>TITLE</td> <td> <b>SD PAVSNER, PAM</b> <input type="checkbox"/> Delete         </td> </tr> <tr> <td>STREET ADDRESS</td> <td><b>2528 N 38 AVENUE</b></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td><b>HOLLYWOOD FL 33021</b></td> </tr> <tr> <td>TITLE</td> <td> <b>DI LANCE, EVELYN</b> <input type="checkbox"/> Delete         </td> </tr> <tr> <td>STREET ADDRESS</td> <td><b>2530 N 38 AVENUE</b></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td><b>HOLLYWOOD FL 33021</b></td> </tr> <tr> <td>TITLE</td> <td><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> </tr> <tr> <td>TITLE</td> <td><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> </tr> </table> </div> <div style="width: 48%;"> <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 85%;"> <b>PD FRAN WHITING</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition         </td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> </tr> <tr> <td>TITLE</td> <td> <b>DV Tamkin, Steve</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition         </td> </tr> <tr> <td>STREET ADDRESS</td> <td><b>2542 N 38 AVE</b></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td><b>HOLLYWOOD FL 33021</b></td> </tr> <tr> <td>TITLE</td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> </tr> <tr> <td>TITLE</td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> </tr> </table> </div> </div>						TITLE	<b>PD KALITAR, STEVE</b> <input checked="" type="checkbox"/> Delete	STREET ADDRESS	<b>2532 N 38 AVE</b>	CITY- ST- ZIP	<b>HOLLYWOOD FL 33021</b>	TITLE	<b>DV TAMKIN, STEVE</b> <input checked="" type="checkbox"/> Delete	STREET ADDRESS	<b>2542 N 38TH AVE</b>	CITY- ST- ZIP	<b>HOLLYWOOD FL 33021</b>	TITLE	<b>SD PAVSNER, PAM</b> <input type="checkbox"/> Delete	STREET ADDRESS	<b>2528 N 38 AVENUE</b>	CITY- ST- ZIP	<b>HOLLYWOOD FL 33021</b>	TITLE	<b>DI LANCE, EVELYN</b> <input type="checkbox"/> Delete	STREET ADDRESS	<b>2530 N 38 AVENUE</b>	CITY- ST- ZIP	<b>HOLLYWOOD FL 33021</b>	TITLE	<input type="checkbox"/> Delete	NAME		STREET ADDRESS		CITY- ST- ZIP		TITLE	<input type="checkbox"/> Delete	NAME		STREET ADDRESS		CITY- ST- ZIP		TITLE	<b>PD FRAN WHITING</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS		CITY- ST- ZIP		TITLE	<b>DV Tamkin, Steve</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS	<b>2542 N 38 AVE</b>	CITY- ST- ZIP	<b>HOLLYWOOD FL 33021</b>	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME		STREET ADDRESS		CITY- ST- ZIP		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME		STREET ADDRESS		CITY- ST- ZIP	
TITLE	<b>PD KALITAR, STEVE</b> <input checked="" type="checkbox"/> Delete																																																																								
STREET ADDRESS	<b>2532 N 38 AVE</b>																																																																								
CITY- ST- ZIP	<b>HOLLYWOOD FL 33021</b>																																																																								
TITLE	<b>DV TAMKIN, STEVE</b> <input checked="" type="checkbox"/> Delete																																																																								
STREET ADDRESS	<b>2542 N 38TH AVE</b>																																																																								
CITY- ST- ZIP	<b>HOLLYWOOD FL 33021</b>																																																																								
TITLE	<b>SD PAVSNER, PAM</b> <input type="checkbox"/> Delete																																																																								
STREET ADDRESS	<b>2528 N 38 AVENUE</b>																																																																								
CITY- ST- ZIP	<b>HOLLYWOOD FL 33021</b>																																																																								
TITLE	<b>DI LANCE, EVELYN</b> <input type="checkbox"/> Delete																																																																								
STREET ADDRESS	<b>2530 N 38 AVENUE</b>																																																																								
CITY- ST- ZIP	<b>HOLLYWOOD FL 33021</b>																																																																								
TITLE	<input type="checkbox"/> Delete																																																																								
NAME																																																																									
STREET ADDRESS																																																																									
CITY- ST- ZIP																																																																									
TITLE	<input type="checkbox"/> Delete																																																																								
NAME																																																																									
STREET ADDRESS																																																																									
CITY- ST- ZIP																																																																									
TITLE	<b>PD FRAN WHITING</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition																																																																								
STREET ADDRESS																																																																									
CITY- ST- ZIP																																																																									
TITLE	<b>DV Tamkin, Steve</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition																																																																								
STREET ADDRESS	<b>2542 N 38 AVE</b>																																																																								
CITY- ST- ZIP	<b>HOLLYWOOD FL 33021</b>																																																																								
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition																																																																								
NAME																																																																									
STREET ADDRESS																																																																									
CITY- ST- ZIP																																																																									
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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: <u>Evelyn Lance Evelyn Lance 2-17-04 Treasurer</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																																									