

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

FILED
Mar 29, 2007 08:00 A
Secretary of State

DOCUMENT # 738272

1. Entity Name

FRENCH VILLAS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

Mailing Address

661 NORTH UNIVERSITY DRIVE
206
HOLLYWOOD FL 33024

661 NORTH UNIVERSITY DRIVE
206
PEMBROKE PINES FL 33024



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1725771

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E037 (10/06)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LAWRENCE, DAVID R
ONE EAST BROWARD BLVD
STE 700
FORT LAUDERDALE FL 33301

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. I am familiar with, and accept the obligations of registered agent.

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
Due By May 1, 2007

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME JOMANT, GARY
STREET ADDRESS 7981 S. FRENCH DRIVE #101
CITY- ST- ZIP PEMBROKE PINES FL 33024

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 000000683563
CITY- ST- ZIP 04/05/07-80049-022 61.25

TITLE TD ☐ Delete
NAME WEIBLEY, DOROTHY
STREET ADDRESS 661 N UNIVERSITY DR, # 206
CITY- ST- ZIP PEMBROKE PINES FL 33024

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

TITLE VD ☐ Delete
NAME MOHAMMAD, KENNY
STREET ADDRESS 7981 S FRENCH DRIVE #103
CITY- ST- ZIP PEMBROKE PINES FL 33024

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

TITLE VD ☐ Delete
NAME HAMEL, LINDA
STREET ADDRESS 7980 N FRENCH DR, APT 206
CITY- ST- ZIP PEMBROKE PINES FL

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

TITLE VD ☐ Delete
NAME JOMANT, GARY JR
STREET ADDRESS 7980 N FRENCH DR, APT 304
CITY- ST- ZIP PEMBROKE PINES FL 33024

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

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 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 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:

[Signature] (PRESIDENT) GARY J JOMANT 3-20-07 894-9406