

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 03, 2004 8:00 am**  
**Secretary of State**

05-03-2004 91248 022 \*\*\*\*61.25

**DOCUMENT # 742166**

1. Entity Name  
CORAL RIDGE COUNTRY CLUB ESTATES  
HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business  
2929 E COMMERCIAL BLVD  
#208  
FT LAUDERDALE, FL 33308

Mailing Address  
2929 E COMMERCIAL BLVD  
#208  
FT LAUDERDALE, FL 33308

94083373



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04272004

Chg-NP

CR2E037 (10/03)

4. FEI Number  
59-2816175

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

REYNOLDS, DOUGLAS  
4875 N. FEDERAL HIGHWAY, 10TH FLOOR  
FT. LAUDERDALE, FL 33308

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

**Filing Fee is \$61.25**  
**Due by May 1, 2004**

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 DT  
NAME KINKER, LEONARD ☐ Delete  
STREET ADDRESS 4710 N.E. 26TH AVE.  
CITY-ST-ZIP FT. LAUDERDALE, FL

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

TITLE S ☒ Delete  
NAME DOS SANTOS, DIANE  
STREET ADDRESS 4360 NE 22 AVE  
CITY-ST-ZIP FT LAUDERDALE, FL

TITLE S ☐ Change ☒ Addition  
NAME Todd Middlebrook  
STREET ADDRESS 4710 NE 25th Ave  
CITY-ST-ZIP Ft. Lauderdale

TITLE D ☐ Delete  
NAME O'CONNER, SHARON  
STREET ADDRESS 2609 NE 33RD STREET  
CITY-ST-ZIP FT LAUDERDALE, FL

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

TITLE D ☒ Delete  
NAME LINDSAY, JOHN  
STREET ADDRESS 4110 BAYVIEW DRIVE  
CITY-ST-ZIP FT LAUDERDALE, FL

TITLE D ☐ Change ☒ Addition  
NAME Christian Duhaime  
STREET ADDRESS 2609 NE 33rd Street  
CITY-ST-ZIP Ft. Lauderdale, FL

TITLE D ☒ Delete  
NAME MARKO, EDWARD J  
STREET ADDRESS 2719 NE 37TH DR  
CITY-ST-ZIP FT LAUDERDALE, FL

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 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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #