


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 06, 2005 8:00 am
Secretary of State

05-06-2005 90091 039 ****61.25

DOCUMENT # 746331

1. Entity Name
THE COURTYARDS OF BROWARD CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**1840 S. W. 81ST AVENUE
 NORTH LAUDERDALE, FL 33068**

Mailing Address
**1840 S. W. 81ST AVENUE
 NORTH LAUDERDALE, FL 33068**

50049812



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

04132005 Chg-NP CR2E037 (10/03)

4. FEI Number
59-1929308

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

Anthony Janosko
1820 SW 81ST AVE.
NO. LAUDERDALE, FL 33068

7. Name and Address of New Registered Agent

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 *Anthony Janosko* *Anthony Janosko* **5/4/2005**

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, 2005

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	DP JOTKOSKY, PHILIP 1830 S W 81ST AVE NORTH FT LAUDERDALE, FL 33068	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD OCHENBLATT, GERALD 1800 S W 81ST AVE NORTH FT LAUDERDALE, FL 33068	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S TROMPETER, LEO 1800 S W 81ST AVE NORTH FT LAUDERDALE, FL 33068	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BT OWEN, GELTZER 1820 SW 81 AVE N LAUDERDALE, FL 33068	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD JANOSKO, ANTHONY 1820 S W 81ST AVE NO LAUDERDALE, FL 33068	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BT FOX, GERALDINE 1820 SW 81 AVE N LAUDERDALE, FL 33068	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Karlo, Sidney 1820 SW 81 Ave. N. Lauderdale, FL 33068	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Board Member Sher, Carol 1820 SW 81 Ave N. Lauderdale, FL 33068	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sec. Schwartz, Jack 1810 SW 81 Ave N. Lauderdale, FL 33068	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President N. Lauderdale, FL 33068	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President N. Lauderdale, FL 33068	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Board Member Rodriguez, Olga 1830 SW 81 Ave. N. Lauderdale, FL 33068	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Anthony Janosko* *Anthony Janosko* **5/1/05** **954-772-7808**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #