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

Mar 29, 2004 8:00 am **DOCUMENT # 747159 Secretary of State** 1. Entity Name 03-29-2004 90047 036 ****61.25 OPERATING ASSOCIATION FOR PALM LAKES CONDOMINIUM, INC. Principal Place of Business Mailing Address 7230 LAKE CIRCLE DR. 7230 LAKE CIRCLE DR. **G1U22UPP** MARGATE FL 33063-8719 MARGATE FL 33063-8719 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) City & State City & State Applied For 4. FEI Number 59-1913454 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LEVIN, CHERYL J P.A. Street Address (P.O. Box Number is Not Acceptable) 4694 NW 103RD AVE. SUNRISE FL 33351-7970 City 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 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees Florida Department of State Due By May 1, 2004 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. SD ☐ Delete TITLE TITLE ☐ Change Addition BECKER, TONI NAME NAME 7210 LAKE CIRCLE DR #408 STREET ADDRESS STREET ADDRESS MARGATE FL CITY-ST-ZIP CITY-ST-ZIP TITLE Delete Change ☐ Addition TITLE HARRIS, IDA NAME NAME Schneider, Rhoda 7340 Lake Circle Dr. 7320 LAKE CIRCLE DR, #102 104 STREET ADDRESS STREET ADDRESS MARGATE FL 33063 Margate, F1. 33063 CITY - ST- ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition KAISER, MORTON NAME NAME 363 ROCK ISLAND RD #201 STREET ADDRESS STREET ADDRESS CITY-ST-7IP MARGATE FL 33063 CITY-ST-ZIP ☐ Delete TITLE TITLE Change Addition RIZZI, GUY NAME NAME 363 ROCK ISLAND DR #102 STREET ADDRESS STREET ADDRESS MARGATE FL 33063 CITY-ST-7IP CITY-ST-ZIP ☐ Change X Addition TITLE 🖊 Delete TITLE HELLER, MARION NAME NAME Feinsilver, Abe 363 ROCK ISLAND DR #107 STREET ADDRESS STREET ADDRESS 480 N.W. 76th Avenue # 401 MARGATE FL 33063 CITY-ST-ZIP CITY-ST-ZIP Margate, Fl. 33063 ☐ Delete TITLE TITLE ☐ Change ■ Addition WESTREICH, JEROME NAME NAME 260 NW 76TH AVE STREET ADDRESS STREET ADDRESS MARGATE FL CITY-ST-ZIP 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

Priday

Date

Daytime Phone #

FILED