

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2008 8:00 am
Secretary of State

04-21-2008 90094 037 ****61.25

DOCUMENT # 749340 1. Entity Name LAUREL OAKS CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 20100 BOCA WEST DRIVE BOCA RATON, FL 33434			Mailing Address 20100 BOCA WEST DRIVE BOCA RATON, FL 33434		
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 59-1995932	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
GRAHAM, SHELLY M 20100 BOCA WEST DRIVE OFC BOCA RATON, FL 33434				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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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 NAME STREET ADDRESS CITY-ST-ZIP	D LEVI, BERNARD 20100 BOCA WEST DRIVE OFC BOCA RATON, FL 33434	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Arnold Kimmel 20100 Boca W Dr #141 Boca Raton, FL 33434
		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SMITH, PATRICIA 20100 BOCA WEST DRIVE OFC BOCA RATON, FL 33434	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Stanley Shapiro 20090 Boca W Dr #371 Boca Raton, FL 33434
		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD NOVIN, ELLEN 20100 BOCA WEST DRIVE OFC BOCA RATON, FL 33434	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Jerome Bernstein 20090 Boca W Dr #378 Boca Raton, FL 33434
		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TANENBAUM, ABE 20100 BOCA WEST DRIVE OFC. BOCA RATON, FL 33434	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Rachel Patron 20110 Boca W Dr #231 Boca Raton, FL 33434
		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD RUBEN, ROBERT 20100 BOCA WEST DRIVE OFC BOCA RATON, FL 33434	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Charles Byck 20090 Boca W Dr #361 Boca Raton, FL 33434
		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PARKER, CARL 20100 BOCA WEST DRIVE OFC. BOCA RATON, FL 33434	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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: ARNOLD KIMMEL <i>Arnold Kimmel</i> 4/15/2008 561-433-8898 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					