

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 749340

**FILED**  
**Apr 01, 2010**  
**Secretary of State**

**Entity Name:** LAUREL OAKS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

20100 BOCA WEST DRIVE  
BOCA RATON, FL 33434

**New Principal Place of Business:**

**Current Mailing Address:**

20100 BOCA WEST DRIVE  
BOCA RATON, FL 33434

**New Mailing Address:**

**FEI Number:** 59-1995932

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GRAHAM, SHELLY M  
20100 BOCA WEST DRIVE OFC  
BOCA RATON, FL 33434 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: TD  
Name: LEVI, BERNARD  
Address: 20100 BOCA WEST DRIVE OFC  
City-St-Zip: BOCA RATON, FL 33434

Title: PD  
Name: SMITH, PATRICIA  
Address: 20100 BOCA WEST DRIVE OFC  
City-St-Zip: BOCA RATON, FL 33434

Title: SD  
Name: NOVIN, ELLEN  
Address: 20100 BOCA WEST DRIVE OFC  
City-St-Zip: BOCA RATON, FL 33434

Title: D  
Name: PATRON, RACHEL  
Address: 20110 BOCA W. DR. #231  
City-St-Zip: BOCA RATON, FL 33434

Title: D  
Name: ARNOLD, KIMMEL  
Address: 20100 BOCA WEST DRIVE OFC  
City-St-Zip: BOCA RATON, FL 33434

Title: VD  
Name: WALTER, LIPKIN  
Address: 20090 BOCA WEST DRIVE OFC  
City-St-Zip: BOCA RATON, FL 33434

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: PATRICIA SMITH

PD

04/01/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date