

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2005 8:00 am
Secretary of State

04-11-2005 90137 007 ****61.25

DOCUMENT # 751180 1. Entity Name GALT OCEAN TERRACE CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 3031 NORTH OCEAN BLVD. FT. LAUDERDALE, FL 33308 US			Mailing Address P O BOX 452347 SUNRISE, FL 33345 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-2010948	
Zip		Country		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	
GLAN MANGEMENT SEVICES, INC. 301 W. CAMINO GARDENS BLVD. SUITE 200 BOCA RATON, FL 33432				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, 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ABERMAN, MARK 3031 N OCEAN BLVD., #1701 FT LAUDERDALE, FL	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LOTTERSTEIN, ART 3031 N. OCEAN BLVD. FORT LAUDERDALE, FL 33308	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DALY, LINDA 3031 N. OCEAN BLVD. FORT LAUDERDALE, FL 33308	☒ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SCHWARZ, SARAH 3031 N. OCEAN BLVD FORT LAUDERDALE, FL 33308	☒ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEROUX, SUZANNE 3031 N. OCEAN BLVD. FORT LAUDERDALE, FL 33308	☒ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD Loterstein, Art 3031 N. Ocean Blvd # 902 Fort Lauderdale, Fl 33308	☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Winneg, Andrea 3031 N. Ocean Blvd # 303 Fort Lauderdale, FL 33308	☐ Change ☒ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Day, Joe 3031 N. Ocean Blvd # 202 Fort Lauderdale, FL 33308	☐ Change ☒ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition			
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: <u>Mark Aberman, President 4/11/05</u> 954 561-1702 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # MARK ABERMAN					

40001010



02132005 Chg-NP CR2E037 (10/03)

Applied For
Not Applicable

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

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.

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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**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
VPD Loterstein, Art 3031 N. Ocean Blvd # 902 Fort Lauderdale, Fl 33308	☒ Change ☐ Addition
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SIGNATURE: Mark Aberman, President 4/11/05 954 561-1702
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
MARK ABERMAN