


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

**FILED**  
**Feb 23, 2004 8:00 am**  
**Secretary of State**

02-23-2004 90061 029 \*\*\*\*61.25

<b>DOCUMENT # 755099</b> 1. Entity Name <b>LAKE EDEN GARDENS &amp; CRYSTAL LAKE CLUB MOBILE HOMEOWNERS TENANTS ASSOCIATION, INCORPORATED</b>					
Principal Place of Business <b>5792 SW 35TH AVE FT. LAUDERDALE FL 33312 US</b>			Mailing Address <b>5792 SW 35TH AVE FT. LAUDERDALE FL 33312 US</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number <b>59-2148141</b>	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>BLAIR, SALLY 5905 SW 34TH TERR. FT LAUDERDALE FL 33312</b>				7. Name and Address of New Registered Agent	
				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City <b>FL</b> 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 _____ (NOTE: Registered Agent signature required when reinstating) <small>Signature, typed or printed name of registered agent and title if applicable. DATE</small>					
<b>FILE NOW: FEE IS \$61.25 Due By May 1, 2004</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b> <b>Make Check Payable to Florida Department of State</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> <b>KETCHEN, LOUIS</b> <b>5845 SW 34TH TERRACE</b> <b>FT LAUDERDALE FL 33312</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>BLAIR, SALLY</b> <b>5905 SW 34 TERR.</b> <b>FT LAUDERDALE FL 33312</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP</b> <b>Craig Bellia</b> <b>3468 SW 59th Ct</b> <b>FT. Lauderdale, FL 33312</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>MOREAU, JOHN-PAUL</b> <b>5777 SW 35TH TERR.</b> <b>FT LAUDERDALE FL 33312</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>Joseph Gardocki</b> <b>3477 SW 59th St.</b> <b>Ft. Lauderdale, FL 33312</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>BOCHENEK, ALICE</b> <b>5792 S W 35TH AVENUE</b> <b>FT LAUDERDALE FL 33312</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>Beverly Levesque</b> <b>5842 SW 35th Way</b> <b>Ft. Lauderdale, FL 33312</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> <b>WASSON, JEANNE</b> <b>SW 59TH ST</b> <b>FT LAUDERDALE FL 33312</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>DIFRANCO, CATHERINE</b> <b>5799 S.W. 34TH TERRACE</b> <b>FT LAUDERDALE FL</b> <input 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 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.					
<b>SIGNATURE: Louis Ketchen LOUIS KETCHEN FEB-2004 (954)966-1528</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					