

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

**FILED**  
**Sep 27, 2004 8:00 am**  
**Secretary of State**

08-18-2004 90007 049 \*\*\*\*61.25

**DOCUMENT # 758452**

1. Entity Name

1323-25 CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business:

1323 NW 8TH AVENUE  
FORT LAUDERDALE FL 33311

Mailing Address

1323 NW 8TH AVENUE  
FORT LAUDERDALE FL 33311

2. Principal Place of Business

1323 N.W. 8th AVE  
Suite, Apt. #, etc.

3. Mailing Address

1323 N.W. 8th AVE  
Suite, Apt. #, etc.



MOORE

CR2E037 (4/04)

City & State

Ft. Laud. Florida

Zip

33311

Country

U.S.A

City & State

Ft. Laud. Florida

Zip

33311

Country

U.S.A

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

WOOD-DENNIS-D.  
1323 NW 8 AVENUE  
HOLLYWOOD FL 33020

7. Name and Address of New Registered Agent

Name Dennis R - Wood -

Street Address (P.O. Box Number is Not Acceptable)

2116 Tyler St -

City Hollywood -

FL

Zip Code

33020

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

9/24/04

**FILE NOW: FEE IS \$61.25**  
**Due By September 8, 2004**

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

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	WOOD, DENNIS R	
STREET ADDRESS	2116 TYLER STREET	
CITY-ST-ZIP	HOLLYWOOD FL 33020	
TITLE	Chrisner-Lesperance	<input type="checkbox"/> Delete
NAME	1323 NW 8th AVE	
STREET ADDRESS	Ft. Laud. FL 33311	
CITY-ST-ZIP		
TITLE	Celiana Etoute	<input type="checkbox"/> Delete
NAME	1323 NW 8th AVE	
STREET ADDRESS	Ft. Laud. FL 33311	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	Chrisner-Lesperance <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	1323 NW 8th AVE
STREET ADDRESS	Ft. Laud. FL 33311
CITY-ST-ZIP	President
TITLE	Celiana Etoute <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	1323 NW 8th AVE
STREET ADDRESS	Ft. Laud. FL 33311
CITY-ST-ZIP	Secretary
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
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: Chrisner-Lesperance -

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-9-04

Date

954-7604675

Daytime Phone #



Attachment  
66434148

FLORIDA DEPARTMENT OF STATE

Glenda E. Hood

Secretary of State

August 19, 2004

954.760.4675  
2

1323-25 CONDOMINIUM ASSOCIATION, INC.  
1323 NW 8TH AVENUE  
FORT LAUDERDALE, FL 33311

Subject: 1323-25 CONDOMINIUM ASSOCIATION, INC.

Reference Number: 758452

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$61.25; however, the report has not been filed and a copy is being returned for the following correction(s):

Provide the title(s) of each officer/director listed on the report or on an attachment.

**TO AVOID THE ADMINISTRATIVE DISSOLUTION/REVOCATION, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.**

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/RH  
ANNUAL REPORTS SECTION

Changes made