

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2007 8:00 am
Secretary of State

03-26-2007 90057 020 ****61.25

DOCUMENT # 768467

1. Entity Name
**HAWAIIAN GARDENS TWIN LAKES PHASE III
ASSOCIATION, INC.**



Principal Place of Business
**7100 W. COMMERCIAL BLVD
STE 107
LAUDERHILL, FL 33319**

Mailing Address
**7100 W. COMMERCIAL BLVD
STE 107
LAUDERHILL, FL 33319**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02092007 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
59-1476437

Applied For
Not Applicable

Zip

Country

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

**AMBASSADOR COMMUNITY MANAGMENT
7100 W COMMERCIAL BLVD
STE 107
FORT LAUDERDALE, FL 33319**

Name

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

City **Lauderhill**

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, 2007**

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 **PD** ☒ Delete
NAME **DEMERS, ROYAL**
STREET ADDRESS **5101 NW 34 STREET #108**
CITY-ST-ZIP **FORT LAUDERDALE, FL 33319**

TITLE **TD** ☐ Delete
NAME **SINARD, GILBERT**
STREET ADDRESS **5001 NW 34TH ST #303**
CITY-ST-ZIP **LAUDERDALE LAKES, FL 33319**

TITLE **SD** ☐ Delete
NAME **LEMIEUX, MARC**
STREET ADDRESS **5002 NW 35TH STREET #110**
CITY-ST-ZIP **FORT LAUDERDALE, FL 33319**

TITLE **VPD** ☐ Delete
NAME **AUDETTE, JACQUELINE**
STREET ADDRESS **3431 NW 50TH ST #305**
CITY-ST-ZIP **LAUDERDALE LAKES, FL 33319**

TITLE **2VP** ☐ Delete
NAME **METHOT, JACQUES**
STREET ADDRESS **5100 NW 35TH STREET**
CITY-ST-ZIP **LAUDERDALE LAKE, FL 33319**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **PD** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Royal Demers
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PRESIDENT

MARCH 16, 2007
Date

Daytime Phone #