2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 26, 2000 8:00 am
Secretary of State
05-26-2000 90040 042 ****61.25

DOCUMENT # N01870

1. Entity Name

THE LAKES OF OAKLAND FOREST CONDOMINIUM, INC.

Principal Place of Business	Mailing Address
2701 S. OAKLAND FOREST DRIVE OAKLAND PARK FL 33309	C/O CONSOLIDATED COMMUNITY MGT 7686 WILES ROAD CORAL SPRINGS FL 33067-2069 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
10034 W McNAB	10034 W McNab Rd
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Tamarac FL	City & State: Tamarac, FL
Zip: 33321 Country	Zip: 33321 Country

4. FEI Number 59-2380089 ☐ Applied For ☐ Not Applicable

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
CONSOLIDATED COMMUNITY MGT, INC 7686 WILES ROAD CORAL SPRINGS FL 33067	Name Street Address (P.O. Box Number is Not Acceptable): 10034 West McNab Road City: Tamarac **FL** Zip Code: 33321

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.

SIGNATURE D Miles 4-15-2000
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW. FEE IS $61.25

9. Election Campaign Financing *Trust Fund Contribution.* ☐ **$5.00** May Be *Added to Fees*

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD DEBRA LARUE 2725 S OAKLAND FOREST DR #202 OAKLAND PARK FL 33309	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD MARTIN CAUNITS 2737 S. OAKLAND FOREST DR #204 OAKLAND PARK FL 33309	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HATCHEL, DIANE 2749 S OAKLAND FOREST DR 103 OAKLAND PARK FL 33309	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD MARY JANE SCHNAUFER 2725 S OAKLAND FOREST DR #203 OAKLAND PARK FL 33309	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD ROGER BOSTON 2749 S OAKLAND FOREST DR #203 OAKLAND PARK FL 33309	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MCMENINUM, MICKIE 2737 S OAKLAND FOREST DR 104 OAKLAND PARK FL 33309	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D NIGUM, KATHLEEN 2713 S OAKLAND FOREST DR 101 OAKLAND PARK FL 33309	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/99)

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: Martin CAUNITS 1/14/2000 (954) 730 8742
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #