

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

FILED
Feb 02, 2004 08:00 AM
Secretary of State

DOCUMENT # N02000002971

1. Entity Name

ROOSEVELT PALMS HOMEOWNERS ASSOCIATION INC.



Principal Place of Business

1732 ROOSEVELT STREET
UNIT B
HOLLYWOOD FL 33020

Mailing Address

1732 ROOSEVELT STREET
UNIT B
HOLLYWOOD FL 33020

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

01-0681104

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

STEWART, JAMES B
1732 ROOSEVELT STREET
UNIT B
HOLLYWOOD FL 33020

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

FILE NOW: FEE IS \$61.25
Due By May 1, 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	PD	<input type="checkbox"/> Delete
NAME	STEWART, JAMES B	
STREET ADDRESS	1732 ROOSEVELT STREET UNIT B	
CITY - ST - ZIP	HOLLYWOOD FL 33020	
TITLE	TD	<input type="checkbox"/> Delete
NAME	GADELRAH, PHILIP	
STREET ADDRESS	1732 ROOSEVELT STREET UNIT C	
CITY - ST - ZIP	HOLLYWOOD FL 33020	
TITLE	S	<input type="checkbox"/> Delete
NAME	JOEL, CRAIG	
STREET ADDRESS	1732 ROOSEVELT STREET UNIT A	
CITY - ST - ZIP	HOLLYWOOD FL 33020	
TITLE	VD	<input type="checkbox"/> Delete
NAME	SAKOWSKI, ROBERT	
STREET ADDRESS	1732 ROOSEVELT ST UNIT D	
CITY - ST - ZIP	HOLLYWOOD FL 33020	
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		<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		

U000000025416

02/02/04-80102-025 61.25

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:

James B Stewart

1-28-04 954-921-9538