

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02824

FILED
Apr 30, 2004
Secretary of State

Entity Name: LAKES OF THE MEADOW VILLAGE HOMES CONDOMINIUM NO. FOUR MAINTENANCE ASSOCIATION, INC.

Current Principal Place of Business:

C/O GUARANTEE MANAGEMENT
7200 NW 7 STREET - SUITE 300
MIAMI, FL 33126

New Principal Place of Business:

C/O GUARANTEE MANAGEMENT
6925 N.W. 42ND STREET
MIAMI, FL 33126

Current Mailing Address:

C/O GUARANTEE MANAGEMENT
7200 NW 7 STREET - SUITE 300
MIAMI, FL 33126

New Mailing Address:

C/O GUARANTEE MANAGEMENT
6925 N.W. 42ND STREET
MIAMI, FL 33126

FEI Number: 59-2444354

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SKRLD, INC.
201 ALHAMBRA CIRCLE
STE. 1102
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: MISHIK, MARGARET DP
Address: 4855 SW 152 CT
City-St-Zip: MIAMI, FL 33185

Title: DST () Delete
Name: RAMIA, JUAN CARLOS DST
Address: 4848-F SW 152 COURT
City-St-Zip: MIAMI, FL 33185

Title: DVP () Delete
Name: GABUARDI, VICTOR DVP
Address: 4832-E SW 152 COURT
City-St-Zip: MIAMI, FL 33185

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: QUADRENY, CATALINA DP
Address: 4865 S.W. 152ND COURT #F
City-St-Zip: MIAMI, FL 33185

Title: DST (X) Change () Addition
Name: ROJAS, KARIN DST
Address: 4865 S.W. 152ND COURT #E
City-St-Zip: MIAMI, FL 33185

Title: DVP (X) Change () Addition
Name: RABANAL, ROGELIO DVP
Address: 4848 S.W. 152ND COURT #H
City-St-Zip: MIAMI, FL 33185

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CATALINA QUADRENY

DP

04/30/2004

Electronic Signature of Signing Officer or Director

Date