

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02824

FILED
May 01, 2003
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:

Current Mailing Address:

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

New Mailing Address:

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DVP (X) Change () Addition
Name: GABUARDI, VICTOR DVP
Address: 4832-E SW 152 COURT
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: MARGARET MISHIK

DP

05/01/2003

Electronic Signature of Signing Officer or Director

Date