

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90440 032 ****61.25

DOCUMENT # N05000009544

1. Entity Name
LAUDERDALE TOWER CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**3650 N FEDERAL HIGHWAY
202
LIGHTHOUSE POINT, FL 33064**

Mailing Address
**3650 N FEDERAL HIGHWAY
202
LIGHTHOUSE POINT, FL 33064**



DO NOT WRITE IN THIS SPACE

04202007 No Chg-NP

CR2E037 (4/06)

4. FEI Number
20-5303867

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**SHENDELL, TAMAR
SHENDELL & ASSOCIATES PA
3650 N FEDERAL HWY #202
LIGHTHOUSE POINT, FL 33064**

**DO NOT WRITE
IN THIS SPACE**

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

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
FEIN, BUD
4705 WOODLANDS BLVD
TAMARAC, FL 33319**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
SHARPE, THOMAS S
2900 N.E. 30TH STREET #3H
FT LAUDERDALE, FL 33306**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
BECART, VIRGINIA
2900 N.E. 30TH STREET #3H #4K
FT LAUDERDALE, FL 33306**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/07

Date

954-564-6474

Daytime Phone #