

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 07, 2008 8:00 am**  
**Secretary of State**

03-07-2008 90042 039 \*\*\*\*61.25

**DOCUMENT # N05680**

1. Entity Name

OUR PLACE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

6024 NW 3 STREET  
MARGATE FL 33063  
US

Mailing Address

PO BOX 936643  
MARGATE FL 33093



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2686594

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

1st MOORE

CR2E037 (10/07)

6. Name and Address of Current Registered Agent

BROUGH, CHADROW & LEVINE, PA  
1900 N. COMMERCE PKWY.  
WESTON FL 33326

7. Name and Address of New Registered Agent

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, 2008**

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 P ☐ Delete  
NAME MIESZKOWSKI, LUPE M  
STREET ADDRESS 6024 N.W. 3RD. ST.  
CITY-ST-ZIP MARGATE FL 33063

TITLE VP ☐ Delete  
NAME DAVIS, TRENESA  
STREET ADDRESS 6006 N.W. 3RD. ST.  
CITY-ST-ZIP MARGATE FL 33063

TITLE S ☐ Delete  
NAME THOMAS, KIMBERLY  
STREET ADDRESS 6030 N.W. 3RD. ST.  
CITY-ST-ZIP MARGATE FL 33063

TITLE T ☐ Delete  
NAME THODDE, MARIA  
STREET ADDRESS 6067 N.W. 3RD. ST.  
CITY-ST-ZIP MARGATE FL 33063

TITLE D ☐ Delete  
NAME LATTIE, DELROY  
STREET ADDRESS 6026 N.W. 3RD. ST.  
CITY-ST-ZIP MARGATE FL 33063

TITLE D ☒ Delete  
NAME MEDINA, WALTER  
STREET ADDRESS 6048 N.W. 3RD. ST.  
CITY-ST-ZIP MARGATE FL 33063

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

*Lupe Mieszkowski*

2/29/08

954

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #