



# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 16, 2004 8:00 am**  
**Secretary of State**

04-16-2004 90113 027 \*\*\*\*61.25

|   |   |   |  |  |  |
|---|---|---|--|--|--|
| <b>DOCUMENT # N10784</b><br>1. Entity Name<br><b>HIGHLAND VILLAGE RESIDENTS COMMITTEE INC.</b>  |   |   |  |   |  |
| Principal Place of Business<br><b>2394 NE 136TH LANE</b><br><b>N. MIAMI BCH, FL 33181 US</b>  |   |   | Mailing Address<br><b>2394 NE 136TH LANE</b><br><b>N. MIAMI BCH, FL 33181 US</b> |  |  |
| 2. Principal Place of Business<br><b>2310 N.E. 135TH TERRACE</b>  |   | 3. Mailing Address<br><b>2310 N.E. 135TH TERRACE</b>                                |  |    |  |
| Suite, Apt. #, etc.   |   | Suite, Apt. #, etc.   |  | 03222004 Chg-NP CR2E037 (10/03)  |  |
| City & State<br><b>NORTH MIAMI BEACH FL</b>   |   | City & State<br><b>NORTH MIAMI BEACH FL</b>   |  | 4. FEI Number<br><b>59-2680097</b>   |  |
| Zip<br><b>33181</b>   |   | Country<br><b>U.S.</b>  |  | 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>  |  |
| 6. Name and Address of Current Registered Agent<br><br><b>BERNARD, JEAN FRANCOIS</b><br><b>2394 NE 136TH LANE</b><br><b>NORTH MIAMI BEACH, FL 33181</b>   |   |   |  | 7. Name and Address of New Registered Agent<br>Name<br><b>LAPRADE MARCEL</b><br>Street Address (P.O. Box Number is Not Acceptable)<br><b>2310 N.E. 135TH TERRACE</b><br>City<br><b>NORTH MIAMI BEACH FL</b> Zip Code<br><b>33181</b> |  |
| 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 <b>MARCEL LAPRADE - PRES.</b> <i>Marcel Laprade</i> <b>04/09/04</b><br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>  |   |   |  |  |  |
| <b>Filing Fee is \$61.25</b><br><b>Due by May 1, 2004</b>   |   | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> |  | <b>\$5.00 May Be Added to Fees</b>   |  |
| <b>Make check payable to Florida Department of State</b>  |   |   |  |  |  |
| <b>10. OFFICERS AND DIRECTORS</b>   |   |   |  |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | PD<br>BERNARD, JEAN FRANCOIS <input checked="" type="checkbox"/> Delete<br>2394 NE 136TH LANE<br>MIAMI, FL 33181  |   |  |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | VP<br>GUILLEMETTE, BENOIT <input type="checkbox"/> Delete<br>3398 NE 136 LANE<br>NORTH MIAMI BEACH, FL 33181  |   |  |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | S<br>MORISSETTE, LIONEL <input checked="" type="checkbox"/> Delete<br>2225 NE 136 TERRACE<br>NORTH MIAMI BEACH, FL 33181                                    |   |  |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | T<br>MALTAIS, FRANCINE <input checked="" type="checkbox"/> Delete<br>2394 NE 136 LANE<br>NORTH MIAMI BEACH, FL 33181  |   |  |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | D<br>COUTURE, NORMAND <input type="checkbox"/> Delete<br>2228 NE 136 LANE<br>NORTH MIAMI BEACH, FL 33181  |   |  |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Delete   |   |  |  |  |
| <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>  |   |   |  |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | PD<br>LAPRADE MARCEL <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition<br>2310 N.E. 135TH TERRACE<br>NORTH MIAMI BEACH, FL 33181 |   |  |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |   |  |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | S<br>POTVIN THERESE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition<br>2430 N.E. 136TH TERRACE<br>NORTH MIAMI BEACH, FL 33181  |   |  |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | T<br>COUTURE MADELINE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition<br>2228 N.E. 136TH LANE<br>NORTH MIAMI BEACH FL 33181    |   |  |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |   |  |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | D<br>BAILLARGEON RAYMOND <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition<br>2078 N.E. 135TH LANE<br>NORTH MIAMI BEACH FL 33181 |   |  |  |  |
| 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. |   |   |  |  |  |
| <b>SIGNATURE: <i>Marcel Laprade - MARCEL LAPRADE</i> 04/09/04 - 305-947-0693</b><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>  |   |   |  |  |  |