

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N12157

1. Entity Name

AQUA ISLES MOBILE HOME PARK TENANTS ASSOC. INC.

FILED

May 09, 2002 8:00 am
Secretary of State

05-09-2002 90052 018 *****61.25

0029542

Principal Place of Business

Mailing Address

GODARD SYLVIE
4787 SW 39TH TERR
FT LAUDERDALE FL 33312
US

GODARD SYLVIE
4787 SW 39TH TERR
FT LAUDERDALE FL 33312
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-2617955

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GODARD, SYLVIE
4787 SW 39TH TERRACE
FT LAUDERDALE FL 33312

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.

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

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME CARRIERE, JEN-PAUL ☐ Delete
STREET ADDRESS 4745 SW 39TH TERR
CITY-ST-ZIP FORT LAUDERDALE FL 33312

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

TITLE VD
NAME DEMERS, CARMEN ☒ Delete
STREET ADDRESS 4767 SW 39TH AVENUE
CITY-ST-ZIP FORT LAUDERDALE FL 33312

TITLE VD ☒ Change ☐ Addition
NAME ROOF, DAVE
STREET ADDRESS 4717 S.W. 39TH Way
CITY-ST-ZIP FORT LAUDERDALE FL 33312

TITLE TD
NAME LADOUCEUR, JOSEE ☒ Delete
STREET ADDRESS 4720 SW 39TH WAY
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE TD ☒ Change ☐ Addition
NAME HOLLINGS WORTH, RUTH
STREET ADDRESS 4765 S.W. 39TH Way
CITY-ST-ZIP FORT LAUDERDALE FL 33312

TITLE SD
NAME GODARD, SYLVIE ☐ Delete
STREET ADDRESS 4787 SW 39TH TERR
CITY-ST-ZIP FORT LAUDERDALE FL 33312

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

TITLE DS
NAME CLOUTIER, JULIETTE ☒ Delete
STREET ADDRESS 4766 SW 39TH AVENUE
CITY-ST-ZIP FORT LAUDERDALE FL 33312

TITLE DS ☒ Change ☐ Addition
NAME BRIERE, ARCADE
STREET ADDRESS 4777 S.W. 39TH Way
CITY-ST-ZIP FORT LAUDERDALE FL 33312

TITLE DT
NAME ROBERSON, GENE ☒ Delete
STREET ADDRESS 4763 SW 39 TERR
CITY-ST-ZIP FORT LAUDERDALE FL 33312

TITLE DS ☒ Change ☐ Addition
NAME PRISCILLA
STREET ADDRESS S.W. 39TH Way
CITY-ST-ZIP FT LAUDERDALE FL 33312

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-21-2002

Date

Daytime Phone #

954
963-2056

CR2E037 (9/01)