





2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2004 8:00 am
Secretary of State

02-12-2004 90012 019 ****61.25

DOCUMENT # N20345 1. Entity Name 2001 BUILDING CONDOMINIUM ASSOCIATION OF FORT LAUDERDALE, INC.					
Principal Place of Business C/O MICHAEL H. GORDON 2001 NE 48TH COURT FT. LAUDERDALE, FL 33308			Mailing Address C/O MICHAEL H. GORDON 2001 NE 48TH COURT FT. LAUDERDALE, FL 33308		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		<div style="font-size: 24pt; font-weight: bold; margin-bottom: 10px;">44010931</div>  <div style="margin-top: 10px;"> 02062004 Chg-NP CR2E037 (10/03) </div>	
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number 65-0014901		Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				<div style="font-size: 24pt; font-weight: bold; margin-bottom: 10px;">44010931</div>  <div style="margin-top: 10px;"> 02062004 Chg-NP CR2E037 (10/03) </div>	
6. Name and Address of Current Registered Agent					
SCHULTZ, RICHARD D 2001 NE 48TH COURT FT. LAUDERDALE, FL 33308					
7. Name and Address of New Registered Agent					
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.				<div style="font-size: 24pt; font-weight: bold; margin-bottom: 10px;">44010931</div>  <div style="margin-top: 10px;"> 02062004 Chg-NP CR2E037 (10/03) </div>	
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
DATE _____					
Filing Fee is \$61.25 Due by May 1, 2004					
9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees				Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ARNOLD, AMY 2001 NE 48TH CT FT. LAUDERDALE, FL 32308	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD GORDON, MICHAEL H. 2001 NE 48TH COURT FT. LAUDERDALE, FL	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SCHULTZ, RICHARD 2001 NE 48TH COURT FT. LAUDERDALE, FL	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VALLE, GABRIEL 2001 NE 48TH COURT FORT LAUDERDALE, FL 33308	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WALKER, EDWARD S. 2001 NE 48TH COURT FT. LAUDERDALE, FL 33308	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WALKER, EDWARD S. 2001 NE 48TH COURT FT. LAUDERDALE, FL 33308 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WALKER, EDWARD S. 2001 NE 48TH COURT FT. LAUDERDALE, FL 33308	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WALKER, EDWARD S. 2001 NE 48TH COURT FT. LAUDERDALE, FL 33308 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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: <i>Richard D. Schultz</i> 2/19/04 954-772-0890 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					
RICHARD D. SCHULTZ, PRESIDENT					