2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 09, 2004 8:00 am
Secretary of State
04-09-2004 90046 017 ****61.25

DOCUMENT # N21987

1. Entity Name

FRENCH RIVIERA VILLAGE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
9524 SW 1ST PLACE CORAL SPRINGS FL 33071 US	9524 SW 1ST PLACE CORAL SPRINGS FL 33071 US

J40039034

MOORE CR2E037 (11/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	2085 University Dr. Suite, Apt. #, etc.
City & State	Coral Springs, FL
Zip / Country	33071 /

4. FEI Number NO-T APPLICABLE ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CALLAHAN, LISA
9524 SW 1ST PLACE
CORAL SPRINGS FL 33071

7. Name and Address of New Registered Agent

Name: Southeast Condominium Mgt, Inc
Street Address (P.O. Box Number is Not Acceptable): 2085 University Drive
City: Coral Springs FL Zip Code: 33071

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: C Chavenge
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, 2004

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PT CALLAHAN, LISA 9524 SW 1ST PLACE CORAL SPRINGS FL 33071	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VT ZOBOROSKI, MARIE 9522 SW 1ST PLACE CORAL SPRINGS FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MAYNARD, CHRISTINA 9526 SW 1ST PLACE CORAL SPRINGS FL 33071	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Hernandez, Christina 9526 SW 1st Place Coral Springs, FL 33071	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T ROSARIO, LORENA 9502 SW 1ST PLACE CORAL SPRINGS FL 33071	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D McFarland, Fred 9530 SW 1st Place Coral Springs, FL 33071	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ 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: Maria Zoboroski 3/17/04 (954)536-5968
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

9-5285