

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N26804

**FILED**  
**Apr 26, 2010**  
**Secretary of State**

**Entity Name:** VILLAS LAS OLAS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1701 E. LAS OLAS BLVD  
FORT LAUDERDALE, FL 33301 US

**New Principal Place of Business:**

**Current Mailing Address:**

1625 S.E. 17TH STREET  
FT. LAUDERDALE, FL 33316 US

**New Mailing Address:**

**FEI Number:** 65-0073936

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GRYPHON PROPERTY MANAGEMENT  
6915 TAFT STREET  
HOLLYWOOD, FL 33024 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** SD  
**Name:** GAIL, SANDERS  
**Address:** 1701 E LAS OLAS BLVD  
**City-St-Zip:** FORT LAUDERDALE, FL 33301

**Title:** PD  
**Name:** FITZER, DAVID  
**Address:** 1721 E LAS OLAS BLVD  
**City-St-Zip:** FORT LAUDERDALE, FL 33301

**Title:** VD  
**Name:** SILK, MARSHALL  
**Address:** 1715 E LAS OLAS BVLD  
**City-St-Zip:** FORT LAUDERDALE, FL 33301

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

**SIGNATURE:** DAVID FITZER

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04/26/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date