

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2004 8:00 am
Secretary of State

04-22-2004 90021 031 ****61.25

DOCUMENT # N93000004681

1. Entity Name
THE PARK AT ROCK CREEK OWNERS ASSOCIATION, INC.



Principal Place of Business
**% LANDMARK MANAGEMENT SERVICES
12323 SW 55TH ST., SUITE 1002
COOPER CITY, FL 33330 US**

Mailing Address
**% LANDMARK MANAGEMENT SERVICES
12323 SW 55TH ST., SUITE 1002
COOPER CITY, FL 33330 US**

44035720



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04132004 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
65-0595704

Applied For
Not Applicable

Zip

Country

Zip

Country

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

**ROSEN & KREILING, PA
2500 WESTON ROAD
WESTON, FL 33331**

Name **Landmark Management Services, Inc**
Street Address (P.O. Box Number is Not Acceptable)
12323 SW 55 ST
Suite 1002
City **Cooper City** FL Zip Code **33330**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when registering)

DATE

**Filing 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 DS ☐ Delete
NAME SANTIAGO, MAX
STREET ADDRESS 1145 SAWGRASS CORP PKWY
CITY-ST-ZIP FORT LAUDERDALE, FL 33323

TITLE ☐ Change ☒ Addition
NAME **Viveros, Patricia**
STREET ADDRESS **4025 Tree Tops Rd**
CITY-ST-ZIP **Cooper City, FL**

TITLE D ☒ Delete
NAME WILFRED, ARIAS
STREET ADDRESS 1145 SAWGRASS CORP PKY
CITY-ST-ZIP FORT LAUDERDALE, FL 33323

TITLE ☒ Change ☐ Addition
NAME **DS Santiago, Max**
STREET ADDRESS **3995 Tree Tops Rd**
CITY-ST-ZIP **Cooper City, FL**

TITLE VP ☐ Delete
NAME ESPOSITO, FRANK
STREET ADDRESS 1145 SAWGRASS CORP PKWY
CITY-ST-ZIP FORT LAUDERDALE, FL 33323

TITLE ☒ Change ☐ Addition
NAME **VP Esposito, Frank**
STREET ADDRESS **4015 Tree Tops Rd**
CITY-ST-ZIP **Cooper City, FL**

TITLE S ☐ Delete
NAME NORA, DEVITO
STREET ADDRESS 1145 SAWGRASS CORP PKY
CITY-ST-ZIP FORT LAUDERDALE, FL 33323

TITLE ☒ Change ☐ Addition
NAME **S Devito, Nora**
STREET ADDRESS **4070 Tree Tops Rd**
CITY-ST-ZIP **Cooper City, FL**

TITLE P ☐ Delete
NAME RASHID, IBRAHIM
STREET ADDRESS 1145 SAWGRASS CORP PKWY
CITY-ST-ZIP FORT LAUDERDALE, FL 33323

TITLE ☒ Change ☐ Addition
NAME **Rashid, Ibrahim**
STREET ADDRESS **4165 Tree Tops Rd**
CITY-ST-ZIP **Cooper City, FL**

TITLE T ☒ Delete
NAME CORCORAN, SUZANNE
STREET ADDRESS 1145 SAWGRASS CORP PKY
CITY-ST-ZIP FORT LAUDERDALE, FL 33323

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

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

Date

Daytime Phone #