## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N96000001486

FILED Jan 17, 2005 Secretary of State

Entity Name: LAUDERDALE BEACH HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 3403 N.E. 27TH STREET FORT LAUDERDALE, FL 33308 **Current Mailing Address: New Mailing Address:** 3403 N.E. 27TH STREET FORT LAUDERDALE, FL 33308 FEI Number: 59-2381510 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LAUDERDALE BEACH HOMEOWNER'S ASSOCIATION ELLIS, JIM 2805 É OAKLAND OARK 3403 N.E. 27TH STREET FORT LAUDERDALE, FL 33308 #180 US FORT LAUDERDALE, FL 33306 US 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: JIM F ELLIS 01/17/2005 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DP () Delete () Change () Addition ELLIS, JIM Name: Name: 2612 N. ATLANTIC BLVD. Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33308 City-St-Zip: Title: Title: ( ) Delete () Change () Addition GRAHAM, GARTH Name: Name: Address: 2720 CENTER AVE. Address: City-St-Zip: FORT LAUDERDALE, FL 33308 City-St-Zip: Title: () Delete Title: () Change () Addition TORREGROSA, JOHN Name: Name: Address: 2909 CENTER AVE Address: City-St-Zip: FORT LAUDERDALE, FL 33308 City-St-Zip: ( ) Delete Title: Title: () Change () Addition AMOROSINO, JOE Name: Name: Address: 2725 CENTER AVE. Address: City-St-Zip: FORT LAUDERDALE, FL 33308 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition MONTROSS, SAM FRANKE, LORI Name: Name: 2400 N. ATLANTIC BLVD. 3509 VISTA PARK Address: Address: FORT LAUDERDALE, FL 33308 FORT LAUDERDALE, FL 33308 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: JIM F ELLIS DP 01/17/2005