

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2006 8:00 am
Secretary of State

04-03-2006 90402 032 ****61.25

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1. Entity Name
MARIGOLD GARDENS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**4805 N.W. 35TH STREET
LAUDERDALE LAKES, FL 33319**

Mailing Address
**4805 N.W. 35TH STREET
LAUDERDALE LAKES, FL 33319**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01202006 Chg-NP CR2E037 (11/05)

4. FEI Number
65-0724336

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**MLM PROPERTY MGMT. CORP.
9900 W. SAMPLE RD., STE 300
CORAL SPRINGS, FL 33065**

7. Name and Address of New Registered Agent

Name **Ambassador Community Management, Inc.**

Street Address (P.O. Box Number is Not Acceptable)

7100 W. Commercial Blvd.,

Ste. 107

City **Lauderhi ll**

FL

Zip Code
33319

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

Martin P. Cole

3/21/06

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

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

TITLE **VPD** ☒ Delete
NAME **ROSSIGNOL, JEAN M**
STREET ADDRESS **3506 NW 49 AVE, #M-504**
CITY-ST-ZIP **LAUDERDALE LAKES, FL 33319**

TITLE **PD** ☒ Delete
NAME **BEARD, RICHARD**
STREET ADDRESS **3506 NW 49 AVE, #M-402**
CITY-ST-ZIP **LAUDERDALE LAKES, FL 33319**

TITLE **SD** ☐ Delete
NAME **GOUGER, MAURICE**
STREET ADDRESS **3506 NW 49TH AVE #M-408**
CITY-ST-ZIP **LAUDERDALE LAKES, FL 33319**

TITLE **TD** ☐ Delete
NAME **GAETON, HADEAU**
STREET ADDRESS **3506 NW 49TH AVE, #M-611**
CITY-ST-ZIP **LAUDERDALE LAKES, FL 33319**

TITLE **D** ☐ Delete
NAME **KAUFMAN, CHARLOTTE**
STREET ADDRESS **3506 NW 49TH AVE, #M-401**
CITY-ST-ZIP **LAUDERDALE LAKES, FL 33319**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **VP** ☐ Change ☒ Addition
NAME **Edward Burns**
STREET ADDRESS **3506 NW 49th Ave**
CITY-ST-ZIP **Lauderdale Lakes, FL 33319**

TITLE **STD** ☐ Change ☒ Addition
NAME **Diane Champagne**
STREET ADDRESS **3506 NW 49 AVE. #501**
CITY-ST-ZIP **Lauderdale Lakes, FL 33319**

TITLE **PD** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☒ Change ☐ Addition
NAME **Gaeton, Nodeau**
STREET ADDRESS **3506 NW 49th Ave - M-611**
CITY-ST-ZIP **Lauderdale Lakes, FL 33319**

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

TITLE **SD, TD** ☐ Change ☒ Addition
NAME **3506 NW 49th Ave, M-611**
STREET ADDRESS
CITY-ST-ZIP **Lauderdale Lakes, FL 33319**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

Charles Long

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #