

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90205 038 ****61.25

DOCUMENT # N96000006247 1. Entity Name VANDERBILT ESTATES PROPERTY OWNERS ASSOCIATION, INC.					
Principal Place of Business 1189 SAWGRASS CORP PARKWAY SUNRISE, FL 33323			Mailing Address 1189 SAWGRASS CORP PARKWAY SUNRISE, FL 33323		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
KATZMAN & KORR 5581 W OAKLNAD PARK BLVD 2ND FLOOR LAUDERHILL, FL 33313				Name <hr/> Street Address (P.O. Box Number is Not Acceptable) <hr/> <hr/> City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small> <div style="float: right;">DATE _____</div>					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	PT	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	PEEL, LEONARD		NAME		
STREET ADDRESS	1660 NW 56 CT		STREET ADDRESS		
CITY-ST-ZIP	CORAL SPRINGS, FL 33076		CITY-ST-ZIP		
TITLE	VP	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BILSKER, BOB		NAME	Pres. Bilsker, Bob c/o Miami Management	
STREET ADDRESS	5645 NW 108 TERRACE		STREET ADDRESS	1145 Sawgrass Corp. Pkwy	
CITY-ST-ZIP	CORAL SPRINGS, FL 33076		CITY-ST-ZIP	Sunrise, FL 33323	
TITLE	ST	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CAFFERTY, GAYLE		NAME	ST. Cafferty, Gayle c/o Miami Management	
STREET ADDRESS	5636 NW 108 WAY		STREET ADDRESS	1145 Sawgrass Corp. Pkwy	
CITY-ST-ZIP	CORAL SPRINGS, FL 33076		CITY-ST-ZIP	Sunrise, FL 33323	
TITLE	TD	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	FIXELLE, GARY		NAME	Treas. Fixelle, Gary c/o Miami Management	
STREET ADDRESS	5632 NW 108 TERR		STREET ADDRESS	1145 Sawgrass Corp. Pkwy	
CITY-ST-ZIP	CORAL GABLES, FL 33076		CITY-ST-ZIP	Sunrise, FL 33323	
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	GRAHAM, GREGORY		NAME	D Graham, Gregory c/o Miami Management	
STREET ADDRESS	5652 NW 108 WAY		STREET ADDRESS	1145 Sawgrass Corp. Pkwy	
CITY-ST-ZIP	CORAL SPRINGS, FL 33076		CITY-ST-ZIP	Sunrise, FL 33323	
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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: <i>Andrew M. Butcher</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			4/28/04 <small>Date</small>		
			954 <small>Daytime Phone #</small>		

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6200