


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2008 08:00 AM
Secretary of State

DOCUMENT # N98000000344	
1. Entity Name LAUDERGATE ISLES CIVIC ASSOCIATION, INC.	

Principal Place of Business 2130 NE 15 ST FORT LAUDERDALE, FL 33304	Mailing Address 2130 NE 15 ST FORT LAUDERDALE, FL 33304
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DO NOT WRITE IN THIS SPACE



01042008 No Chg-NP CR2E037 (4/06)

4. FEI Number NOT APPLICABLE	Applied For Not Applied
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5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

8. Name and Address of Current Registered Agent

HAMILTON, AMY JONES
2130 NE 15TH STREET
FORT LAUDERDALE, FL 33304

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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 _____ (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

U00000946484 DATE
05/30/08-80051-014 70.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WILLIAMS, REX 2 037 NE 2130 NE 15 ST FORT LAUDERDALE, FL 33304
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV HAMILTON, AMY 2130 NE 15 ST FORT LAUDERDALE, FL 33304
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MUTTI, FRANCESCO 2106 NE 15 ST FT LAUDERDALE, FL 33304
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DANIELS, MARY 2047 NE 14 CT FT LAUDERDALE, FL 33304
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWN, ALAN 2031 NE 15 ST FT LAUDERDALE, FL 33304
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE *James M. H.* T.D. FRANCESCO MUTTI TD 2106 NE 15 ST FT LAUDERDALE 33304