PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000052526

1, Corporation Name

LAUDERDALE LAKES TOWNHOMES, INC.

Principal Plac	e of Business	Mailing Address			
2859 N.E. 60TH STREET FT LAUDERDALE FL 33308		2859 N.E. 60TH STREET FT LAUDERDALE FL 33308		DO NOT WRITE IN THIS SPACE	
	•			3. Date Incorporated or Qualifed	
				06/11/1998	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26			Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional
22		27	_	5. Certificate of Status Desired	Fee Required
City & Stat	6	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current ye	
24	25	29 30)	Personal Property Tax.	☐ Yes XNo
Name and Address of Current Registered Agent				10. Name and Address of New Regist	ered Agent
			81 Name	Irm C. Hatch 8	Sa.
FILINGS, INC.			82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
3732 N.W. 16TH STREET				101 Hury AIA Su	te 220
FT.	LAUDERDALE FL 33311-4132		83		
			84 City 1 /	2	85 Zip Code
			<u> </u>	to Beach	FL 32963
11. Pursuant	to the provisions of Sections 107.050:	2 and 607.1508, Florida \$tatutes,	the above-named corp	oration submits this statement for the purpo	se of changing its registered appointment as registered
agent. I a	im familiar with, and accept the obligat	ions of, Section 60 .0505, Florida	a Statutes.	on's board of directors. I hereby accept the	1 .
SIGNATURE		116		4	11,199
Ololwii Gitz	Signature, typed or printed name of registred agen		gistered Agent signature require		而 " "
12.	OFFIGERS AN		_13.	ADDITIONS/CHANGES TO OFFICER	RS AND DIRECTORS IN 12 Additio
TITLE	D	☐ DELETE	1.1 TITLE		□ Change □ Additio
NAME	ZITO, JOHN		1.2 NAME		
STREET ADDRESS	_		1.3 STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL 33308		1.4 CITY-ST-ZIP		
TITLE		☐ DELETE	2.1 TITLE		☐ Change ☐ Additio
NAME .			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP		3- V	2,4 CITY-ST-ZIP		

6.4 CITY-ST-ZIP CITY-ST-ZIP 14. 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 annual report or supplemental annual seport 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or an an absorbinent with an laddress, with all other like empowered.

3.1 TITLE

3.2 NAME

4.1 TITLE

4.2 NAME

5.1 TITLE

5,2 NAME

6.1 TITLE

6.2 NAME

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

TITLE

NAME

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NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

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UVREQUIRED D OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

□ DELETE

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CR2E034 (11/98)

Apr 16, 1999 8:00 am Secretary of State

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