

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 708350

1. Entity Name

BOCA RATON HARBOUR CONDOMINIUM, INC.

FILED
Jan 19, 2000 8:00 am
Secretary of State

01-19-2000 90007 035 ****61.25

Principal Place of Business

Mailing Address

2771 SOUTH OCEAN BLVD
BOCA RATON FL 33432

2771 SOUTH OCEAN BLVD
BOCA RATON FL 33432-8301

ABU05916



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1160216

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ULMER, ROBERT
2771 SO OCEAN BLVD
BOCA RATON FL 33432

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE DS
NAME THOMASON, TERESA
STREET ADDRESS 2771 SOUTH OCEAN BOULEVARD
CITY-ST-ZIP BOCA RATON FL 33432

☐ Delete

TITLE D
NAME FIORELLO, SAM
STREET ADDRESS 2771 SO OCEAN BLVD
CITY-ST-ZIP BOCA RATON, FL 00000 33432

☐ Delete

TITLE PD
NAME ULMER, ROBERT
STREET ADDRESS 2771 SO OCEAN BLVD
CITY-ST-ZIP BOCA RATON FL

☐ Delete

TITLE VTD
NAME PICARD, DONALD
STREET ADDRESS 2771 SO OCEAN BLVD
CITY-ST-ZIP BOCA RATON, FL 00000

☐ Delete

TITLE D
NAME ALYANAKIAN, LEON
STREET ADDRESS 2771 S OCEAN BLVD
CITY-ST-ZIP BOCA RATON FL 33432

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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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:

Robert ULMER ROBERT ULMER

1/8/2000

561 391 0608

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)