

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 708350

1. Entity Name

BOCA RATON HARBOUR CONDOMINIUM, INC.



Principal Place of Business

2771 SOUTH OCEAN BLVD
BOCA RATON FL 33432

Mailing Address

2771 SOUTH OCEAN BLVD
BOCA RATON FL 33432

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-1160216

Applied For
Not Applicable

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~~ COWEN, JAMES
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 reappointing)

DATE

FILE NOW: FEE IS \$61.25
After September 12, 2001, min. will be \$236.25

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE NAME ~~CHERRY, LINDA, SECRETARY~~ ☒ Change ☐ Addition
STREET ADDRESS 2771 SO. OCEAN BLVD
CITY-ST-ZIP BOCA RATON, FL 33432 DS

TITLE NAME ~~D~~ ~~FIORIELLO, SAM~~ ☒ Delete
STREET ADDRESS 2771 SO. OCEAN BLVD
CITY-ST-ZIP BOCA RATON, FL 00000 33432

TITLE NAME ~~TREASURER~~ ☒ Change ☐ Addition
STREET ADDRESS ~~LACKEY, MELISSA~~
CITY-ST-ZIP 2771 SO. OCEAN BLVD
BOCA RATON, FL D/T

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

TITLE NAME ~~PRESIDENT~~ ☒ Change ☐ Addition
STREET ADDRESS ~~COWEN, JAMES~~
CITY-ST-ZIP 2771 SO. OCEAN AVE BLVD
BOCA RATON FL 33432 P/D

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

TITLE NAME ~~VICE PRESIDENT~~ ☒ Change ☐ Addition
STREET ADDRESS ~~LEPPINK, CHATHAIA~~
CITY-ST-ZIP 2771 SO. OCEAN BLVD
BOCA RATON FL 33432 V/D

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

TITLE NAME ~~DIRECTOR~~ ☒ Change ☐ Addition
STREET ADDRESS ~~MARCELLO, DONNA~~
CITY-ST-ZIP 2771 SO. OCEAN AVE BLVD
BOCA RATON, FL D

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
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

SIGNATURE REQUIRED

JAMES COWEN

8/4/01

541-391-0008

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Sep 05, 2001 8:00 am
Secretary of State

08-13-2001 90065 045 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (5/01)