

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 713250

1. Entity Name

SINGER ISLAND CIVIC ASSOCIATION, INC.

FILED
Mar 01, 2000 8:00 am
Secretary of State

03-01-2000 90023 007 ****61.25

Principal Place of Business 1281 N OCEAN DRIVE BOX 114 RIVIERA BEACH FL 33404 US	Mailing Address 1281 N OCEAN DRIVE BOX 114 RIVIERA BEACH FL 33404-4739 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

4. FEI Number 23-7445268	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DONOVAN & BORDELEAU, P.A.
~~1201 US HWY ONE #205~~
~~NORTH PALM BCH FL 33400~~

7. Name and Address of New Registered Agent

Name

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

3221 Grove Rd
Palm Beach Gardens FL 33410

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 *Kathleen Bordeleau* DATE 02/19/00

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**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	TD	<input type="checkbox"/> Delete
NAME	RUDOLPH, HANS D	
STREET ADDRESS	145 OCEAN AVE #519	
CITY-ST-ZIP	PALM BEACH SHORES FL 33404	
TITLE	PD	<input type="checkbox"/> Delete
NAME	WOLF, PHILIP	
STREET ADDRESS	5400 N OCEAN DR, #1101	
CITY-ST-ZIP	RIVIERA BEACH FL 33404	
TITLE	VD 1	<input type="checkbox"/> Delete
NAME	RASMUSSEN	
STREET ADDRESS	1202 SUGAR SANDS BLVD	
CITY-ST-ZIP	SINGER ISLAND FL 33404	
TITLE	VD 3	<input type="checkbox"/> Delete
NAME	RADFORD, WILLIAM	
STREET ADDRESS	1111 POWELL DRIVE	
CITY-ST-ZIP	SINGER ISLAND FL 33404	
TITLE	VD 2	<input type="checkbox"/> Delete
NAME	HARTMAN, JACK	
STREET ADDRESS	1201 YACHT HARBOR DR	
CITY-ST-ZIP	RIVIERA BEACH FL 33404	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	LEVY, ABRAHAM	
STREET ADDRESS	5380 N OCEAN DRIVE, #19F	
CITY-ST-ZIP	RIVIERA BEACH FL	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	#520	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RASMUSSEN, JAY	
STREET ADDRESS	1262 SUGAR SANDS	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ROSEN, MARTIN	
STREET ADDRESS	5200 N OCEAN DRIVE #805	
CITY-ST-ZIP	SINGER ISLAND, FL 33404	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 *Hans D. Rudolph* DATE 2/23/00 DAYTIME PHONE # 561 707 8058

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/99)