

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 19, 2002 8:00 am
Secretary of State

08-19-2002 90137 027 ****61.25

DOCUMENT # 713260

1. Entity Name

PARK SOUTH THREE, INC., A CONDOMINIUM

975314



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

1321 N.W.43RD AVE.
 LAUDERHILL FL 33313

1321 N.W.43RD AVE.
 LAUDERHILL FL 33313

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1264128

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

HARRIS, ELODIE
 1300 NW 43 TERR
 UNIT 15-106
 LAUDERHILL FL 33313

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

After September 13, 2002,
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	P	<input type="checkbox"/> Delete
NAME	HARRIS, ELODIE	
STREET ADDRESS	1300 N W 43 TERRACE UNIT 15-106	
CITY-ST-ZIP	FORT LAUDERDALE FL 33313	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	MCDONALD, RUBY	
STREET ADDRESS	1321 N.W. 43 AVE	
CITY-ST-ZIP	LAUDERHILL FL	
TITLE	DVP	<input type="checkbox"/> Delete
NAME	WARD, ESLYN	
STREET ADDRESS	1311 N.W. 43 AVE	
CITY-ST-ZIP	LAUDERHILL FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	PEACOCK, JOAN	
STREET ADDRESS	1320 NW 43 TERRACE	
CITY-ST-ZIP	LAUDERHILL FL 33313	
TITLE	TD	<input type="checkbox"/> Delete
NAME	LEFKA, MAURICE	
STREET ADDRESS	501 SW 10TH AVE	
CITY-ST-ZIP	FORT LAUDERDALE FL 33312	
TITLE		<input type="checkbox"/> Delete

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Florance Olfert	
STREET ADDRESS	1321 NW 43rd Ave UNIT 12-108	
CITY-ST-ZIP	LAUDERHILL, FL 33313	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JOAN PEACOCK MARJORIE Appleby	
STREET ADDRESS	1321 NW 43 AVE UNIT 12-202	
CITY-ST-ZIP	LAUDERHILL, FL 33313	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Diamond Economy	
STREET ADDRESS	1320 NW 43rd Terrace UNIT 15-201	
CITY-ST-ZIP	LAUDERHILL, FL 33313	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ARMANCIA BARNABE	
STREET ADDRESS	1300 NW 43 TERR UNIT 15-206	
CITY-ST-ZIP	LAUDERHILL FL 33313	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Floyde Price	
STREET ADDRESS	1300 NW 43 TOM #15-207	
CITY-ST-ZIP	LAUDERHILL, FL 33313	

CR2E037 (4/02)

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~~ GEORGE ISAACS, Property Manager 954 7367900