

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 04, 2003 8:00 am
Secretary of State

07-24-2003 90111 007 ****61.25

DOCUMENT # 713401

1. Entity Name

THE FOUR SEASONS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

Mailing Address

**333 SUNSET DRIVE
FT. LAUDERDALE FL 33301**

**333 SUNSET DRIVE
FT. LAUDERDALE FL 33301**

55053161

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-1196724**

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

**MENDEZ, JOHN D.
333 SUNSET DRIVE #1101
FT. LAUDERDALE FL 33301**

Name **BECKER / POLIAKOFF**
Street Address (P.O. Box Number is Not Acceptable)
3111 STIRLING ROAD
City **FORT LAUD.** FL Zip Code **33310-9057**

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]

PRES

7/13/03

FILE NOW: FEE IS \$61.25

After September 10, 2003, min will be \$236.25

9. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☐ Delete
NAME **VILONE, ALFRED**
STREET ADDRESS **333 SUNSET DRIVE**
CITY-ST-ZIP **FT LAUDERDALE FL 33301**

TITLE **PREP** ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **ROTH, JOHN**
STREET ADDRESS **333 SUNSET DRIVE**
CITY-ST-ZIP **FT LAUDERDALE FL 33301**

TITLE **V-PR** ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **SD** ☐ Delete
NAME **BUNNELL, DIANNE**
STREET ADDRESS **333 SUNSET DRIVE**
CITY-ST-ZIP **FT LAUDERDALE FL 33301**

TITLE **SEC** ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **HANBURY, GEORGE III**
STREET ADDRESS **333 SUNSET DR**
CITY-ST-ZIP **FT LAUDERDALE FL 33301**

TITLE **DIRECTOR** ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **BJELAJAC, MARCY P**
STREET ADDRESS **333 SUNSET DRIVE**
CITY-ST-ZIP **FT LAUDERDALE FL 33301**

TITLE **OFFICER** ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **TD** ☐ Delete
NAME **BOWEN, IRVING**
STREET ADDRESS **333 SUNSET DR**
CITY-ST-ZIP **FT LAUDERDALE FL 33301**

TITLE **TRUST** ☐ Change ☐ Addition
NAME
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

7/31/03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (4/03)