

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 28, 2000 8:00 am
Secretary of State

03-28-2000 90100 043 ****61.25

DOCUMENT # 716811

1. Entity Name

CRYSTAL COURT MANOR NO. 11 CONDOMINIUM, INC.

Principal Place of Business

Mailing Address

CRYSTAL COURT MANOR NO. 11
 APT #8B
 HOLLYWOOD FL 33019
 US

1451-1455 NO. 12TH CT
 APT #8B
 HOLLYWOOD FL 33019

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1446315

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

OMBRELLO, JOSEPH
1451 N 12TH CT 8B
HOLLYWOOD FL 33019

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input type="checkbox"/> Delete
NAME	OMBRELLO, JOSEPH	
STREET ADDRESS	1451 N 12TH CT	
CITY-ST-ZIP	HOLLYWOOD FL 33019	
TITLE	V	<input type="checkbox"/> Delete
NAME	BROOKS, ARTHUR	
STREET ADDRESS	1455 N 12TH CT., #7B	
CITY-ST-ZIP	HOLLYWOOD FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	SAVELLA, HELEN	
STREET ADDRESS	1451 N 12TH CT, #12A	
CITY-ST-ZIP	HOLLYWOOD FL 33019	
TITLE	D	<input type="checkbox"/> Delete
NAME	ZIMBERG, DOROTHY W.	
STREET ADDRESS	1455 NO. 12TH CT. APT. 1B	
CITY-ST-ZIP	HOLLYWOOD FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	PREVETTE, MICHELLE	
STREET ADDRESS	500 NE 14TH AVE	
CITY-ST-ZIP	HALLANDALE FL 33009	
TITLE	S	<input type="checkbox"/> Delete
NAME	LUKE, BARBARA	
STREET ADDRESS	1455 N 12TH CT	
CITY-ST-ZIP	HOLLYWOOD FL	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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	TREAS. REPETTI, NANCY	
STREET ADDRESS	1455 NO. 12TH CT. 2A	
CITY-ST-ZIP	HOLLYWOOD FLORIDA 33019	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

Joseph Ombrello
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-24-2000

Date

954

954-3091

Daytime Phone #

CR2E037 (9/99)