

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 23, 2002 8:00 am
Secretary of State

01-23-2002 90056 029 ****70.00

DOCUMENT # 717234

1. Entity Name

VICTORIA PARK TOWER ASSOCIATION, INC.

Principal Place of Business

Mailing Address

900 NE 18TH AVE
 FT. LAUDERDALE FL 33304
 US

900 NE 18TH AVE
 FT. LAUDERDALE FL 33304
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1318150

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LIEB, HERBERT
 900 NE 18 AVE APT 708
 FT. LAUDERDALE FL 33304

Name **LIEB HERBERT**

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

5636 NW 108 WAY

City **CORAL SPRINGS**

FL

Zip Code **33076**

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

HERBERT LIEB

Herbert Lieb

1/8/02

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 Delete
 NAME **P CURASI, MIKE**
 STREET ADDRESS **900 N.E. 18TH AVE., #1208**
 CITY-ST-ZIP **FT. LAUDERDALE FL 33304**

TITLE Change Addition
 NAME **D VINCE SEPE**
 STREET ADDRESS **900 NIE 18TH AVE #1404**
 CITY-ST-ZIP **FORT LAUD. FL. 33304**

TITLE Delete
 NAME **VP STACEY, WALLY**
 STREET ADDRESS **900 N. E. 18TH AVE #1008**
 CITY-ST-ZIP **FT. LAUDERDALE FL-**

TITLE Change Addition
 NAME **D MIKE WASDO**
 STREET ADDRESS **900 NIE 18TH AVE #1101**
 CITY-ST-ZIP **FORT LAUDERDALE FL. 33304**

TITLE Delete
 NAME **T LIEB, HERBERT**
 STREET ADDRESS **900 N.E. 18TH AVE., #708**
 CITY-ST-ZIP **FT. LAUDERDALE FL 33304**

TITLE Change Addition
 NAME **T HERBERT LIEB**
 STREET ADDRESS **5636 NW 108 WAY**
 CITY-ST-ZIP **CORAL SPRINGS FL. 33076**

TITLE Delete
 NAME **S MALOUF, GEORGE**
 STREET ADDRESS **900 N E 18TH AVE # 1401**
 CITY-ST-ZIP **FT. LAUDERDALE FL 33304**

TITLE Change Addition

TITLE Delete
 NAME **D LEONE, BETTY**
 STREET ADDRESS **900 NE 18TH AVE #407**
 CITY-ST-ZIP **FT. LAUD FL 33304**

TITLE Change Addition

TITLE Delete
 NAME **D SPOHR, JUDY**
 STREET ADDRESS **900 NORTHEAST 18TH AVENUE**
 CITY-ST-ZIP **FT. LAUDERDALE FL 33304**

TITLE Change Addition

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: *Michael C. ...*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/7/02 954-763-4575
 Date Daytime Phone #

CR2E037 (9/01)