

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2002 8:00 am
Secretary of State

05-05-2002 90077 024 ****61.25

DOCUMENT # 718211

1. Entity Name

MELALEUCA GARDENS CONDOMINIUM, INC.

Principal Place of Business

Mailing Address

LAUDERDALE LAKES
LAUDERDALE LAKES FL 33313
US

5141 W OAKLAND PRK BLVD
M201
LAUDERDALE LAKES FL 33313
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1372747

Applied For

Not Applicable

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

WEITZ, IRVING
5141 W. OAKLAND PK BLVD
LAUDERDALE LAKES 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.

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	S	<input type="checkbox"/> Delete
NAME	WEITZ, SELMA	
STREET ADDRESS	5141 W. OAKLAND PARK BLVD	
CITY-ST-ZIP	LAUDERDALE LAKES FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	VAN NESS, JEAN	
STREET ADDRESS	5141 W OAKLAND PKWY	
CITY-ST-ZIP	LAUDERDALE LAKES FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	HEBERT, RICHARD	
STREET ADDRESS	5141 W OAKLAND PKWY	
CITY-ST-ZIP	LAUDERDALE LAKES FL	
TITLE	B	<input checked="" type="checkbox"/> Delete
NAME	FRIDAY, AVIS	
STREET ADDRESS	5141 W OAKLAND PKWY	
CITY-ST-ZIP	LAUDERDALE LAKES FL	
TITLE	VP	<input type="checkbox"/> Delete
NAME	ROBINSON, W.M.	
STREET ADDRESS	5141 W. OAKLAND PK.BLVD.	
CITY-ST-ZIP	LAUDERDALE LKS. FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	IRVING WEITZ	
STREET ADDRESS	5141 W. OAKLAND PK BLVD	
CITY-ST-ZIP	LAUDERDALE LAKES, FL	

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ROBERT BEAUCHAMP	
STREET ADDRESS	5141 W. OAKLAND PK BLVD	
CITY-ST-ZIP	LAUDERDALE LAKES FL 33313	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HOWARD BAER	
STREET ADDRESS	5141 W. OAKLAND PK BLVD	
CITY-ST-ZIP	LAUDERDALE LAKES, 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		

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)
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/6/02 **496-2906**
 Date Daytime Phone #

CREE037 (9/01)