

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 08, 2002 8:00 am**  
**Secretary of State**

08-08-2002 90090 011 \*\*\*\*70.00

**DOCUMENT # 719074**

1. Entity Name

**OPAL TOWERS CONDOMINIUM ASSOCIATION, INC.**

Principal Place of Business

Mailing Address

**1149 HILLSBORO MILE  
HILLSBORO BEACH FL 33062-1724**

**1149 HILLSBORO MILE  
HILLSBORO BEACH FL 33062-1724**

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

**59-1367008**

Applied For

Not Applicable

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

**BECKER & POLIAKOFF, P.A.  
3111 STIRLING ROAD  
FORT LAUDERDALE FL 33312**

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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**SECD  
RISTAINO, REGINA  
1149 HILLSBORO MILE APT 201S  
HILLSBORO BEACH FL 33062** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**V.P.D  
Patrick McWeeney  
1149 Hillsboro Mile #507N  
Hillsboro Beach, FL 33062** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
MARTORELLA, FRANK DR  
1147 HILLSBORO MILE APT 815S  
HILLSBORO BEACH FL 33062** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**2nd V.P.D  
Robert Loester  
1147 Hillsboro Mile PH55  
Hillsboro Beach, FL 33062** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
RIEGER, DANIEL DR.  
1147 HILLSBORO MILE APT 604S  
HILLSBORO BEACH FL 33062** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
Lenny ALCAHO  
#90615 1147 HILLSBORO Mile  
Hillsboro Beach, FL 33062** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
BELL, LEONARD  
1147 HILLSBORO MILE APT PH11S  
HILLSBORO BEACH FL 33062** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
Paul Niedermeyer  
1149 Hillsboro Mile #911N  
Hillsboro Beach, FL 33062** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**TD  
NOVAK, STANLEY M  
1149 HILLSBORO MILE APT 109 N  
HILLSBORO BCH FL 33062** ☒ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PRESIDENT/D  
FEDERICO, EUGENE  
1147 HILLSBORO MILE APT 907S  
HILLSBORO BEACH FL 33062** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ 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: **REGINA RISTAINO**  
**SIGNATURE REQUIRED**

**7/8/02 954-428-0668**

CR2E037 (4/02)