

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 21, 2000 8:00 am
Secretary of State

03-21-2000 90098 042 ****61.25

DOCUMENT # 720748

1. Entity Name

MANSON CONDOMINIUM ASSOCIATION NO. 3, INC.

Principal Place of Business

Mailing Address

10330 N MILITARY TRAIL
 4B
 PALM BEACH GARDENS FL 33410
 US

10330 N MILITARY TRAIL
 4B
 PALM BEACH GARDENS FLA 33410-4638
 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

NOT APPLICABLE

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

LETTS, STEVEN
 10330 NORTH MILITARY TR
 PALM BEACH GDNS FL 33410

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	D	<input type="checkbox"/> Delete
NAME	MOSSEY, M.	
STREET ADDRESS	10330 N MILITARY TRAIL	
CITY-ST-ZIP	PALM BCH GRDNS FL	
TITLE	P	<input type="checkbox"/> Delete
NAME	LETTS, STEVEN F	
STREET ADDRESS	10330 N MILITARY TRAIL	
CITY-ST-ZIP	PALM BCH GRDNS FL	
TITLE	VP	<input type="checkbox"/> Delete
NAME	SCHEFFEL, W.	
STREET ADDRESS	10330 N MILITARY TRAIL	
CITY-ST-ZIP	PALM BCH GRDNS FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	CAMPION, EDMOND	
STREET ADDRESS	10330 N MILITARY TRAIL	
CITY-ST-ZIP	PALM BCH GRDNS FL	
TITLE	S	<input type="checkbox"/> Delete
NAME	DI GEORGIO, RICK	
STREET ADDRESS	10330 N MILITARY TRAIL	
CITY-ST-ZIP	PALM BCH GRDNS FL	
TITLE	T	<input type="checkbox"/> Delete
NAME	BURKE, MICHAEL W	
STREET ADDRESS	10330 N MILITARY TRAIL	
CITY-ST-ZIP	PALM BCH GRDNS FL 33410	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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

3/15/00

Date

561-625-6684

Daytime Phone #