

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 05, 2002 8:00 am**  
**Secretary of State**

03-05-2002 90100 032 \*\*\*\*61.25

**DOCUMENT # 720748**

1. Entity Name

**MANSON CONDOMINIUM ASSOCIATION NO. 3, INC.**

Principal Place of Business

Mailing Address

**10330 N MILITARY TRAIL  
 4B  
 WEST PALM BEACH FL 33410  
 US**

**10330 N MILITARY TRAIL  
 4B  
 WEST PALM BEACH FL 33410  
 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



DO NOT WRITE IN THIS SPACE

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

**JOSEPH G. ERNST**

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

**10330 N. MILITARY TRAIL APT 7A**

City

**PALM BEACH GARDENS,**

**FL**

Zip Code  
**33410**

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

*JOSEPH GREGORY ERNST*

*Joseph Ernst*

*2/20/02*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

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**  Delete  
 NAME **MOSSEY, M.**  
 STREET ADDRESS **10330 N MILITARY TRAIL**  
 CITY-ST-ZIP **PALM BCH GRDNS FL**

TITLE **SAME**  Change  Addition  
 NAME **SAME**  
 STREET ADDRESS **SAME**  
 CITY-ST-ZIP **SAME**

TITLE **P**  Delete  
 NAME **LETTS, STEVEN F**  
 STREET ADDRESS **10330 N MILITARY TRAIL**  
 CITY-ST-ZIP **PALM BCH GRDNS FL**

TITLE **PRESIDENT**  Change  Addition  
 NAME **ERNST, JOSEPH G.**  
 STREET ADDRESS **10330 N MILITARY TRAIL 7A**  
 CITY-ST-ZIP **PALM BEACH GARDENS, FL 33410**

TITLE **VP**  Delete  
 NAME **SCHEFFEL, W.**  
 STREET ADDRESS **10330 N MILITARY TRAIL**  
 CITY-ST-ZIP **PALM BCH GRDNS FL**

TITLE **VICE PRESIDENT**  Change  Addition  
 NAME **LAURA REINHARD**  
 STREET ADDRESS **10330 N MILITARY TRAIL 1B**  
 CITY-ST-ZIP **PALM BEACH GARDENS, FL 33410**

TITLE **D**  Delete  
 NAME **CAMPION, EDMOND**  
 STREET ADDRESS **10330 N MILITARY TRAIL**  
 CITY-ST-ZIP **PALM BCH GRDNS FL**

TITLE **SAME**  Change  Addition  
 NAME **SAME**  
 STREET ADDRESS **SAME**  
 CITY-ST-ZIP **SAME**

TITLE **S**  Delete  
 NAME **DI GEORGIO, RICK**  
 STREET ADDRESS **10330 N MILITARY TRAIL**  
 CITY-ST-ZIP **PALM BCH GRDNS FL**

TITLE **SECRETARY**  Change  Addition  
 NAME **GENEVIESE CURRAN**  
 STREET ADDRESS **10330 N MILITARY TRAIL 5B**  
 CITY-ST-ZIP **PALM BEACH GARDENS, FL 33410**

TITLE **T**  Delete  
 NAME **RUSCH, BETTY MAE**  
 STREET ADDRESS **10330 MILITARY TR # 3B**  
 CITY-ST-ZIP **PALM BCH GRDNS FL 33410**

TITLE **SAME**  Change  Addition  
 NAME **SAME**  
 STREET ADDRESS **SAME**  
 CITY-ST-ZIP **SAME**

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:

**BETTY MAE RUSCH**

*Betty Mae Rusch*

(561) 655-4030  
 2/21/02

CR2E037 (9/01)