

2002 UNIFORM BUSINESS REPORT (UBR)**FILED****Jan 28, 2002 8:00 am**
Secretary of State

01-28-2002 90039 019 ****61.25

DOCUMENT # 726533

1. Entity Name

LIMETREE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

**10128 43RD DRIVE SOUTH
BOYNTON BEACH FL 33436****10128 43RD DRIVE SOUTH
BOYNTON BEACH FL 33436**

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

59-1758088

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****LEVINE, JAY S
2500 N MILITARY TRAIL #275
PALM BEACH GARDENS FL 33431**

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 \$61.259. 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
**PD
KOPPELMAN, WILLIAM M
10124 45 WAY S
BOYNTON BEACH FL** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VPD
SMITH, PATRICIA A.
10101 44 DRIVE SO
BOYNTON BEACH FL 33436** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**Secretary
Patricia A. Smith
10101 44th Drive So.
Boynton Beach, FL 33436** ☒ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**TD
O'BRIEN, ROY
10124 45TH AVENUE SOUTH
BOYNTON BEACH FL** ☒ DeleteTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**Director
Edward W. Farrell
10124 46th Avenue So.
Boynton Beach, FL 33436** ☐ Change ☒ AdditionTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VP/D
WALSH, FRANCIS J
10145 45TH AVENUE SO.
BOYNTON BEACH FL 33436** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
CORSO, ANN MARIE
10076 44TH DRIVE SO.
BOYNTON BEACH FL 33436** ☒ DeleteTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**Director
John E. Fertig
10079 44th Way So.
Boynton Beach, FL 33436** ☒ Change ☒ AdditionTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
CAIN, EDWARD
10125 42ND AVENUE SOUTH
BOYNTON BEACH FL 33436** ☐ DeleteTITLE
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

WILLIAM H. KOPPELMAN
PRESIDENT 01/17/02 (561) 737-6797

CR2E037 (9/01)