## 2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

DOCUMENT # 729265  1. Entity Name FARNHAM "H" CONDOMINIUM ASSOCIATION, INC.					FILED  DECKETARY OF STATE  STATISTON OF CORPORATIONS			
1 11 11 11 11 11 11 11 11 11 11 11 11 1		171 FARNHAM H DEERFIELD BEACH FL 3344				•		
		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			4 FFI Number	DO NOT WRITE IN		oplied For
City & Stat		City & State  Zip Country			4. FEI Number 59	-1927466	No	ot Applicable
Zip Country		Zip	Cou	ntry	5. Certificate of Status Desired S8.75 Addition Fee Required  7. Name and Address of New Registered Agent			
6. Name and Address of Current Registered Agent				Name				
BALISH, LAWRENCE				Street Address (P.O. Box Number is Not Acceptable)				
/ 171 FARNI DEERFIELI		City			<u></u> ,	FL Zip Cod	le	
8. The above named entity submits this statement for the purpose of changing its registered					ered agent, or both, in	the state of Florida.		
	نبر ؛	, ,						
SIGNATURE	Signature, typed or printed name of registered agent an	d title if applicable. (NOTE	: Registered	d Agent signature require	ed when reinstating)		DATE	
FILE NOW: FEE IS \$61.25  9. Election Campaign F Trust Fund Contribut				· -	\$5.00 May Be Added to Fees		Check Payable artment of State	
10.	OFFICERS AND DIRE	***	11.	· ·	ADDITIONS/CHANG	ES TO OFFICERS A	ND DIRECTORS IN	N 10 Addition
TITLE  NAME STREET ADDRESS CITY-ST-ZIP	D BALISH, FRANCINE FARNHAM H 171 DEERFIELD BCH FL	□ Delete			900	000525 -04/12/02 **15067.	5 <b>8199</b> - 010580	9 101
TITLE NAME STREET ADDRESS	DV ARNOLD, JULIA FARNHAM H-173	□ Delete		E ET ADDRESS			Change	Addition
TITLE NAME STREET ADDRESS	DEERFIELD BCH FL DST BROOK, MARY FARNHAM H-184	☐ Delete	TITLE NAM STRE	E ET ADDRESS	<del> </del>	N <del>.</del> .	☐ Change	Addition
CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	DEERFIELD BCH FL PD BALISH, LAWRENCE FARNHAM H-171 DEERFIELD BCH FL	☐ Delete	TITLE NAM STRE		14.,		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GREEN, LOUIS 182 FARNHAM H DEERFIELD BEACH FL	☐ Delete			M.	14/11	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	CITY	E ET ADDRESS -ST-ZIP	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		☐ Change	Addition
	certify that the information supplied with to on this report or supplemental report is to reportation or the receiver or trustee empoy, or on an attachment with an address, we rule.	rue and accurate and that r vered to execute this repor ith all other like empowered.			e same legal effect as 17, Florida St <u>atu</u> tes; ar			or Block 11 if