

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2001 8:00 am
Secretary of State
 04-30-2001 90044 041 *****61.25

UNB00009

DOCUMENT # 729838

1. Entity Name

THE OAKS CONDOMINIUM ASSOCIATION, INC. OF BROWAR

Principal Place of Business

Mailing Address

**4151 STIRLING ROAD
 FORT LAUDERDALE FL 33314**

**4151 STIRLING ROAD
 FORT LAUDERDALE FL 33314**

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

59-1658714

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

**D'ALESSIO, ANTHONY
 4131 STIRLING ROAD
 #107
 DAVIE FL 33314**

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 NAME STREET ADDRESS CITY-ST-ZIP	VPD HOLMGREN, MICHAEL 4121 STIRLING RD, #402 FORT LAUDERDALE FL 33314	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D D'ALESSIO, TONY 4131 STIRLING ROAD #107 FT LAUDERDALE FL 33314	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD WINKELHOLZ, ADRIANA 4111 STIRLING RD FT LAUDERDALE FL 33314	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MYERS, JAY A 4121 STIRLING RD, #403 FORT LAUDERDALE FL 33314	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BELEW, CHARLES 4111 STIRLING ROAD, #206 FT LAUDERDALE FL 33314	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD DAVIS, RONALD 4121 STIRLING RD # 301 FT LAUDERDALE FL 33314	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RUSH, SYD 4131 STIRLING RD # 204 FT LAUDERDALE FL 33314	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)