2002 UNIFORM BUSINESS REPORT (UBR)

PALM BEACH LEISUREVILLE SUMMERS LAKE APARTMENTS BUILDING NO. 1 CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

3. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

2001-SW 13TH AVE **BOYNTON BCH FL 33426-5339**

2. Principal Place of Business

Suite, Apt. #, etc.

STERN, MARK L

2001 SW 13TH AVENUE

BOYNTON BEACH FL 33426

City & State

Zip

2001 SW 13TH AVE BOYNTON BCH FL 33426-5339

FILED DOCUMENT # **730052** 1. Entity Name

Apr 22, 2002 8:00 am § Secretary of State

04-22-2002 90222 007 ****61.25



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.

APT 2

Country

6. Name and Address of Current Registered Agent

(NOTE: Registered Agent signature required when reinstating)

Country

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 Delete TITLE ☐ Addition FAULISE, JOSEPH NAME NAME STREET ADDRESS 2001 SW 13TH AVE, #104 STREET ADDRESS CITY-ST-7IP **BOYNTON BEACH FL** CITY-ST-ZIF TITLE ☐ Delete TITLE Change Addition NAME SNEDEKER, ROBERTA NAME STREET ADDRESS 2001 SW 13TH AVENUE APT 5 STREET ADDRESS CITY-ST-ZIP BOYNTON BEACH FL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition STERN, MARK L. NAME NAME STREET ADDRESS 2001 SW 13TH AVENUE APT 2 STREET ADDRESS CITY-ST-ZIE **BOYNTON BEACH FL** CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME JONES, DONALD C NAME STREET ADDRESS 2001 SW 13TH AVE., #103 STREET ADDRESS CITY-ST-ZIP BOYNTON BEACH FL CITY-ST-ZIP SD ☐ Delete TITLE Change Addition JONES, ELEANOR L. NAME STREET ADDRESS 2088 SW 13TH WAY STREET ADDRESS CITY-ST-ZIP **BOYNTON BEACH FL** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME Faulise, Judith M. NAME STREET ADDRESS 2001 SW 13 AVE 104 STREET ADDRESS BOYNTON BEACH FL 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:

135-0246