

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

73/301

1. Entry Name

Lyndhurst & CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

Sam Brofsky
Lyndhurst D 76

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

LYNDHURST D 76

City & State

Suite, Apt. #, etc.

LYNDHURST D 76

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1916387

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

Condominium Broker Organization
3501 West Miami
Deerfield Beach FL 33442

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 reappointing)

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	Brofsky Sam Lyndhurst D 76 Deerfield Beach, FL 33442	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MARCHESE CHARLES LYNDHURST D 77 DEERFIELD BEACH FL 33442	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ZINKELSTIEN SUSAN LYNDHURST D 79 DEERFIELD BEACH FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FELD ELAINE LYNDHURST D 89 DEERFIELD BEACH FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	WAGMAN DIANA LYNDHURST D 75 DEERFIELD BEACH, FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SERMA VICTOR LYNDHURST D 90 DEERFIELD BEACH, FL 33442	☐ Delete

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	DIRECTOR KATIE SCHUSTER LYNDHURST D 91 DEERFIELD BEACH, FL	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DEERIER DENISE LYNDHURST D 84 DEERFIELD BEACH, FL	☐ 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 #

FILED
Jul 12, 2000 8:00 am
Secretary of State

04-25-2000 90324 001 15,006.25

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DO NOT WRITE IN THIS SPACE

CR2E037 (9/99)