

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 08, 2000 8:00 am
Secretary of State

05-08-2000 90129 037 ****61.25

DOCUMENT # 732671

1. Entity Name

709 CURTISS PARKWAY CONDOMINIUM ASSOCIATION INC.

Principal Place of Business

Mailing Address

**709 CURTISS PARKWAY
 MIAMI SPRINGS FL 33166**

**709 CURTISS PARKWAY
 MIAMI SPRINGS FL 33166-7140**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1640243

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**HENSHEY, SAMUEL T
 709 CURTISS PARKWAY
 UNIT #14
 MIAMI SPRINGS FL 33166**

Name **Phillips, Marlon**

Street Address (P.O. Box Number is Not Acceptable)

**709 Curtiss Parkway
 Unit #30**

City **Miami Springs**

FL

Zip Code
33166

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

Harlan J. Vann
 Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

APRIL 26, 2000
 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	PD	<input checked="" type="checkbox"/> Delete
NAME	HENSHEY, SAMUEL	
STREET ADDRESS	709 CURTISS PKWY, STE #14	
CITY-ST-ZIP	MIAMI SPRINGS FL 33166	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	LAMBERT, DUDLEY	
STREET ADDRESS	709 CURTISS PARKWAY	
CITY-ST-ZIP	MIAMI SPRINGS FL	
TITLE	TD	<input type="checkbox"/> Delete
NAME	VANN, HARLAN J	
STREET ADDRESS	709 CURTISS PKWY #32	
CITY-ST-ZIP	MIAMI SPRINGS FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	DUFF, GEORGE F	
STREET ADDRESS	709 CURTISS PKWY #PH	
CITY-ST-ZIP	MIAMI SPRING FL	
TITLE	SD	<input type="checkbox"/> Delete
NAME	PHILLIPS, MARION	
STREET ADDRESS	709 CURTISS PKWY #30	
CITY-ST-ZIP	MIAMI SPRINGS FL 33166	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	PD	PD	<input checked="" type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	Phillips, Marlon			
STREET ADDRESS	709 Curtiss Pkwy, Ste. #30			
CITY-ST-ZIP	Miami Springs Fl 33166			
TITLE	VD	Stoltz, Jean	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME				
STREET ADDRESS		709 Curtiss Parkway Ste 11		
CITY-ST-ZIP		Miami Springs Fl		
TITLE	TD	TD	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME		Vann, Harlan J.		
STREET ADDRESS		709 Curtiss Pkwy #32		
CITY-ST-ZIP		Miami Springs Fl		
TITLE	SD	SD	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME		Lambert, Dudley		
STREET ADDRESS		709 Curtiss Parkway #31		
CITY-ST-ZIP		Miami Springs Fl.		
TITLE	D	Leach, Lester	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME				
STREET ADDRESS		709 Curtiss Pkwy #34		
CITY-ST-ZIP		Miami Springs Fl 33166		
TITLE			<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				
STREET ADDRESS				
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: *Harlan J. Vann*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-00

Date

305-887-5076

Daytime Phone #

CR2E037 (9/99)