FILED

## 2002 UNIFORM BUSINESS REPORT (UBR)

## Feb 21, 2002 8:00 am DOCUMENT # **733191** Secretary of State 1. Entity Name 02-21-2002 90160 049 \*\*\*\*61.25 SNAPPER VILLAGE CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 6901 SW 116TH CT. 6901 SW 116TH CT. **MIAMI FL 33173 MIAMI FL 33173** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1688688 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent. 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) **HYMAN & KAPLAN** 150 W. FLAGLER ST. STE 2701 MIAMI FL 33130 Zip Code FL 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 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. GABRIEL VILLADA (PRES.) TITLE Delete TITLE ★ Addition CR2E037 (9/01 NAME NUNEZ. ANTONIO 6614 SW. 114 PL. UNIT #C NAME STREET ADDRESS 6874 SW 114 PLACE # A STREET ADDRESS CITY-ST-ZIP *miami, FL.* 33173 V.Paes.) Maria Horvath MIAMI FL 33173 CITY-ST-ZIP ۷P **X** Delete TITLE Change Addition NAME KOCH, EDWARD NAME 7124 SW. 114PL. UNITH F STREET ADDRESS 7024 SW. 114 PLACE.#G STREET ADDRESS CITY-ST-ZIP MIAMI, FL. 33173 CITY-ST-ZIP MIAMI FL 33173 3 D TITLE ☐ Delete TITLE T) LOIG KAUFMAN Change ■ Addition NAME MOWRER, JANET NAME 6455 5W. 116 PL. #A STREET ADDRESS 6609 SW 116 PLACE #E STREET ADDRESS MIAMI, FL. 33173 CITY-ST-ZIP MIAMI FL 33173 CITY-ST-ZIP (Sec.) NENDY ROBBINS TITLE D ☐ Delete TITLE ☐ Change Addition Addition GILBERT, TOLEDO NAME NAME 7114 6W. 114PL. # E STREET ADDRESS 6624 S.W. 116TH PLACE #A STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL . 33173 MIAMI FL D) JANET MOWRER **X** Delete TITLE **Change** ☐ Addition NAME SWANSON, PAUL NAME 6609 SW. 116 PL. # E STREET ADDRESS 7009 S.W. 115 PLACE UNIT B STREET ADDRESS CITY-ST-ZIP MIAMI FL 33173 CITY-ST-ZIP MIAMI, FL. 33173 DARIMEL TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME **DECIMEL**, RICHARD NAME STREET ADDRESS 6323 SW 116 PL UNIT E STREET ADDRESS CITY-ST-ZIP MIAMI FL 33173 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:

02 305-595-7569