

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 733783

FILED
Apr 28, 2002 8:00 AM
Secretary of State

Entity Name: PRESIDENTIAL ESTATES PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

1900 EMBASSY DR
WEST PALM BEACH, FL 334011022 US

New Principal Place of Business:

Current Mailing Address:

10 LA COSTA CIRCLE
WEST PALM BEACH, FL 334011022

New Mailing Address:

FEI Number: 59-1646614

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, GLENN
1900 EMBASSY DRIVE
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SMITH, GLENN
Address: 2 SHANNON CIR
City-St-Zip: W PALM BEACH, FL 33401

Title: D () Delete
Name: KURIT, BERNIE,
Address: 3125 EMBASSY DR.
City-St-Zip: W PALM BEACH, FL

Title: DVP () Delete
Name: KOHN, BONNIE
Address: 10 LA COSTA CIR
City-St-Zip: W PALM BEACH, FL 33401

Title: D () Delete
Name: BELLO, MARIA
Address: 3215 EMBASSY DR
City-St-Zip: W. PALM BEACH, FL 33401

Title: D () Delete
Name: GREENE, RANDALL
Address: 3222 EMBASSY DR
City-St-Zip: WEST PALM BEACH, FL 33401

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BLUDAU, JUERGEN
Address: 2829 EMBASSY DR
City-St-Zip: W PALM BEACH, FL 33401

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BONNIE KOHN

MRS.

04/28/2002

Electronic Signature of Signing Officer or Director

_____ Date