

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 01, 2000 8:00 am
Secretary of State

02-01-2000 90036 027 ****61.25

DOCUMENT # 735097

1. Entity Name

VILLAS OF SHERIDAN CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

VILLAS OF SHERIDAN CLUB HOUSE
 HOLLYWOOD FL 33021
 US

2524 N. 38TH AVENUE
 HOLLYWOOD FL 33021-1356
 US

2. Principal Place of Business

3. Mailing Address

Same as Above

253091-38 AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

HOLLYWOOD

City & State

City & State

FL

Zip

Country

Zip

Country

33021

Broward

4. FEI Number

59-1690491

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

SUSS, DAVID
 2524 N. 38TH AVENUE
 HOLLYWOOD FL 33021

Name *Steve KOLITOUS*

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

2532 N. 38 AVE.

HOLLYWOOD FL.

City

FL

Zip Code

33021

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

Evelyn Lance DT

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1-30-00

**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	SUSS, DAVID	
STREET ADDRESS	2524 N. 38TH AVENUE	
CITY-ST-ZIP	HOLLYWOOD FL	
TITLE	DV	<input type="checkbox"/> Delete
NAME	TAMKIN, STEVE	
STREET ADDRESS	2542 N 38TH AVE	
CITY-ST-ZIP	HOLLYWOOD FL	
TITLE	SD	<input type="checkbox"/> Delete
NAME	SHOOKET, JONATHAN	
STREET ADDRESS	3915 SHERIDAN ST	
CITY-ST-ZIP	HOLLYWOOD FL	
TITLE	DT	<input type="checkbox"/> Delete
NAME	LANCE, EVELYN	
STREET ADDRESS	2530 N 38 AVE	
CITY-ST-ZIP	HOLLYWOOD FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Steve KOLITOUS	
STREET ADDRESS	2532 N. 38 AVE	
CITY-ST-ZIP	HOLLYWOOD FL. 33021	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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:

Evelyn Lance

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-30-2000 954-964-1799