2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 07, 2002 8:00 am
Secretary of State
03-07-2002 90018 010 ****61.25

DOCUMENT # 738281

1. Entity Name

BAY COUNTRY CLUB CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
17720 NORTH BAY ROAD SUNNY ISLES BEACH ~~BAL HARBOUR BEACH~~ FL 33160	17720 NORTH BAY ROAD SUNNY ISLES BEACH ~~NORTH MIAMI BEACH~~ FL 33160

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1844511 ☐ 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
WEINSTEIN, ALVIN N 19 W. FLAGLER STE 920 MIAMI FL 33101	Name ERIC M. GLAZER, PA Street Address (P.O. Box Number Is Not Acceptable) CORPORATE PLACE 1920 EAST HALLANDALE BCH BLVD City HALLANDALE FL Zip Code 33009

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 X _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	D ROZINOV, ALEXANDER 17720 NORTH BAY ROAD #9-C MIAMI FL 33160	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD MENDOZA, DOMINIQUE 17720 NORTH BAY ROAD #702 SUNNY ISLES BCH, FL 33160	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD OFFSHTEIN, AKIVA 17720 NORTH BAY ROAD #6-B MIAMI FL 33160	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S HOWARD, ROGER 17720 NORTH BAY ROAD # PH-3 SUNNY ISLES BCH, FL 33160	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD HAMEL, GERARD 17720 NORTH BAY ROAD #1103 MIAMI FL 33160	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD LILIENFELD, ROBERT J. 17720 N. BAY RD. 12D MIAMI FL 33160	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S OLIVA, DONALD 17720 N. BAY ROAD, #1002 MIAMI FL 33160	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD OBSTBAUM, PEARL 17720 NORTH BAY ROAD #701 MIAMI FL 33160	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

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 REQUIRED PRESIDENT 2-19-02 305-935-0828
FOR OFFICE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #