2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # 741202

1. Entity Name

PALM BEACH WINDEMERE, INC., A CONDOMINIUM



## FILED May 05, 2003 8:00 am § Secretary of State

05-05-2003 91781 039 \*\*\*\*61.25

Principal Place of Business Mailing Address

934 S DIXIE HWY
LANTANA FL 93462

LANTANA FL 93462

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Suite, Apt. #, etc.    Check Here   Facility	Principal Place of Business	- 41	73. Mailing Address	<del></del>				
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Zip Country Zip S. Certificate of Status Desired	Suite, Apt. #, etc.		Suite, Apt. #, etc.		☐ CH	HECK HERE IF MAI	KING CHANGES	
6. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  Name  Na	South Palm	Beach	City 8 date	Brach	4. FEI Number 59-	1910599	<u> </u>	oplied For of Applicable
Name    Street Address (PG_Box Number is Not Acceptable)	33 480 L	untry	33480	Country Le 3 A	5. Certificate of Stat	us Desired		
Sirent Address (PD. Box Numbers is Not Acceptable)    Sirent Address (PD. Box Numbers is Not Acceptable)	6. Name and A	dress of Current	Registered Agent	Name	7. Name and Addre	ess of New Registe	red Agent	
A. 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. I am familiar with, and accent the obligations, of registered agent, or both, in the State of Florida. I am familiar with, and accent the obligations, of registered agent, or both, in the State of Florida. I am familiar with, and accent the obligations, or registered agent, or both, in the State of Florida. I am familiar with, and accent the obligations, or registered agent, or both, in the State of Florida. I am familiar with, and accent the obligations, or registered agent, or both, in the State of Florida. I am familiar with, and accent the obligations, or registered agent, or both, in the State of Florida. I am familiar with, and accent the obligations, or registered agent, or both, in the State of Florida. I am familiar with, and accent the obligations of	- IAAWWOLA-ANNE	17/C-	ESOU	_	John L	3007		<b>&gt;</b>
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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. I am familiar with, and accelerate the obligations of registered agent and the statement for the purpose of changing its registered agent agent and the statement for the purpose of changing its registered agent agent agent and the statement for the purpose of changing its registered agent	LANTAMA FL 38462			di-	- 502	-	<del>_</del>	-
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SIGNATURE  Signature, hower printed name of registered agent and minist applicable.  FILE NOW: FEE IS \$61.25  9. Election Campaign Financing Trust Fund Contribution.  10			ir the purpose of changing its r	registered office or reg	istered agent, or both, in th	e State of Florida. I	am familiar with,	and accept
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Trust Fund Contribution. Added to Fees   Florida Department of State    10.	Signature, types or printed	name of registered agent	and the if applicable. (NOTE:	Registered Agent signature re	quired when reinstating)	D.	ATE	
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2. 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 am an officer or direct of the corporation or the receiver en rustre, empowered to execute this report as required by mapter 617, Florida Statutes; and that my name appear in 100 for Block 11 changed, or on an attachment with an address, with all other like empowered.	indicated on this report or sur of the corporation or the recei	plemental report is ver er trustet, empr	true and accurate and that my owered to execute this report a	y signature shall have is required by Chapter	the same legal effect as if r 617, Florida Statutes; and	nade under oath; the that my name app	at I am an officer at in language 10 or	or director Block 11 if