

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 06, 2002 8:00 am
Secretary of State

02-27-2002 90062 032 ****61.25

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1. Entity Name

BAL HARBOUR 101 CONDOMINIUM ASSOCIATION, INC. ✓

Principal Place of Business

Mailing Address

**10155 COLLINS AVENUE
 BAL HARBOUR FL 33154**

**10155 COLLINS AVENUE
 BAL HARBOUR FL 33154**

40754



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1901485

Applied For
 Not Applicable

Zip

Country

Zip

Country

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

**EISINGER, DENNIS
 4000 HOLLYWOOD BLVD
 SUIT E265 SOUTH
 HOLLYWOOD FL 33021**

Name

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

City

FL

Zip Code

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 accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**After September 13, 2002,
 min. will be \$236.25.**

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 ☒ Delete
 NAME GORSON, PEG E.
 STREET ADDRESS 10155 COLLINS AVE
 CITY-ST-ZIP BAL HARBOUR FL

TITLE VP ☒ Delete
 NAME ZEITLIN, SUNEY
 STREET ADDRESS 10155 COLLINS AVENUE
 CITY-ST-ZIP BAL HARBOUR FL 33154

TITLE T ☒ Delete
 NAME COHEN, LEON
 STREET ADDRESS 10155 COLLINS AVE
 CITY-ST-ZIP BAL HARBOUR FL 33154

TITLE SD ☒ Delete
 NAME DUNBAR, MARY ANN
 STREET ADDRESS 10155 COLLINS AVE
 CITY-ST-ZIP BAL HARBOUR FL 33154

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE PD ☐ Change ☐ Addition
 NAME COHEN, LEON
 STREET ADDRESS 10155 COLLINS AVE
 CITY-ST-ZIP BAL HARBOUR FL 33154

TITLE VP ☐ Change ☐ Addition
 NAME MARTHA CROWN
 STREET ADDRESS 10155 COLLINS AVE
 CITY-ST-ZIP BAL HARBOUR FL 33154

TITLE T ☐ Change ☐ Addition
 NAME ALLAN WESLER
 STREET ADDRESS 10155 COLLINS AVE
 CITY-ST-ZIP BAL HARBOUR, FL 33154

TITLE SD ☐ Change ☐ Addition
 NAME Golda Weiss
 STREET ADDRESS 10155 COLLINS AVE
 CITY-ST-ZIP BAL HARBOUR, FL 33154

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ 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:

Signature of Leon Cohen

8/1/02

305-866-7616

CR2E037 (4/02)