

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 742212

1. Entity Name

SWANSEA CONDOMINIUM ASSOCIATION, INC.

FILED
Jul 12, 2000 8:00 am
Secretary of State

04-25-2000 90324 001 15,006.25

Principal Place of Business SWANSEA A 1001/CVE DEERFIELD BEACH FL 33442	Mailing Address SWANSEA A 1001/CVE DEERFIELD BEACH FL 33442
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc. City & State	3. Mailing Address Suite, Apt. #, etc. City & State
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Zip	Country	Zip	Country
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4. FEI Number 59-1977384	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$6.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

CONDOMINIUM OWNERS ORGANIZATION CVE, INC.
3501 WEST DRIVE
DEERFIELD BEACH FL 33442-9985

7. Name and Address of New Registered Agent

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing) DATE _____

**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

TITLE	D	<input type="checkbox"/> Delete
NAME	GALIT, JACK	
STREET ADDRESS	SWANSEA A 4018	
CITY-ST-ZIP	DEERFIELD BCH FL 33442	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	GOROBETZ, GERTRUDE RHODA	
STREET ADDRESS	SWANSEA A 2012	
CITY-ST-ZIP	DEERFIELD BCH FL 33442	
TITLE	V	<input type="checkbox"/> Delete
NAME	BAROTH, BERNARD	
STREET ADDRESS	SWANSEA A 2004	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	
TITLE	P	<input type="checkbox"/> Delete
NAME	BUDICK, MIRIAM	
STREET ADDRESS	SWANSEA B 4029	
CITY-ST-ZIP	DEERFIELD BEACH FL	
TITLE	ST	<input type="checkbox"/> Delete
NAME	KLEIN, GERTRUDE	
STREET ADDRESS	SWANSEA A 1001	
CITY-ST-ZIP	DEERFIELD BEACH FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	GLASS, JEAN	
STREET ADDRESS	SWANSEA B 1027	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RHODA GOROBETZ	
STREET ADDRESS	SWANSEA A 2012	
CITY-ST-ZIP	DEERFIELD BCH FL 33442	
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: Gertrude Klein GERTRUDE KLEIN 2/2/00 954-426-1863
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)