·2062 UNIFORM BUSINESS REPORT (UBR)

Feb 12, 2002 8:00 am **DOCUMENT # 742411 Secretary of State** 1. Entity Name 02-12-2002 90052 010 ****61.25 ANDOVER J CONDOMINIUM ASSOCIATION. INC. Mailing Address Principal Place of Business 251 ANDOVER J 251 ANDOVER J WEST PALM BEACH FL 33417 WEST PALM BEACH FL 33417 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-1887469 Not Applicable \$8.75 Additional Zip Country Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name_ Street Address (P.O. Box Number is Not Acceptable) **EVANS, ARLENE** 244 ANDOVER J W PALM BCH FL 33417 Zip Code City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. (9/01) ☐ Change Addition CPD □ Delete TITLE EDELMAN, FLORENCE NAME NAME CR2E037 STREET ADDRESS STREET ADDRESS 256 ANDOVER J CITY-ST-ZIP CITY-ST-ZIP W. PALM BEACH FL 33417 CPD ☐ Change ☐ Addition ☐ Delete TITI F DAGENAIS, CLAUDE NAME NAME STREET ADDRESS STREET ADDRESS 251 ANDOVER J CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33417 **VPD** ☐ Delete TITLE ☐ Change Addition TITLE LANDAU, LEAH NAME NAME 246 ANDOVER J STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP WEST PALM BEACH FL 33417 ☐ Change ☐ Addition ☐ Delete TITLE MOSKOWITZ, IRVING NAME NAME 252 ANDOVER J STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33417 ☐ Change ☐ Addition ☐ Delete TITLE GOLDBERG, CAROL NAME 237 ANDOVER J STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP WEST PALM BEACH FL 33417 ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME ANDOVER J CONDO ASS / INC. STREET ADDRESS STREET ADDRESS 252 ANDOVER J CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 eath; 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:

Said E Nagenai

1-22-02

561-687-3497

FILED