

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 17, 2001 8:00 am
Secretary of State

01-17-2001 90003 022 ****61.25

DOCUMENT # 742415

1. Entity Name

CAMDEN B CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

**CAMDEN B
 CENTURY VILLAGE
 WEST PALM BEACH FL 33417**

**WINDSOR E-102
 CENTURY VILLAGE
 WEST PALM BEACH FL 33417**

00003828



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

CAMDEN - B -

Suite, Apt. #, etc.

CENTURY VILLAGE

City & State
WEST PALM BEACH, FL.

City & State

4. FEI Number

59-1634332

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

Zip
33417

Country
USA

Zip

Country

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)

City

FL

Zip Code

**BUMMOLO, SAL
 102 WINDSOR E
 WEST PALM BEACH FL 33417**

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

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

(NOTE: Registered Agent signature required when reinstating)

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**PD
 SCHMALL, NAT
 102 WINDSOR E CENTURY VILLAGE
 WEST PALM BEACH FL 33417** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
BUMMOLO, SAL ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**TD
 KUDREN, DORA
 CAMDEN, B-47
 W. PALM BEACH FL** ☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**TD
 GRESACK, MARCIA
 30 CAMDEN B CENTURY VILLAGE
 WEST PALM BEACH, FL. 33417** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**VD
 FISCHER, ROY
 31 CAMDEN B CENTURY VILLAGE
 WEST PALM BEACH FL 33417** ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**D
 GRESACK, MARCIA
 30 CAMDEN B CENTURY VILLAGE
 WEST PALM BEACH FL 33417** ☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**D
 SOKALSKI, BILL
 4B CAMDEN B CENTURY VILLAGE
 WEST PALM BEACH, FL. 33417** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**SD
 STERN, IDA
 CAMDEN B 32 CEN VILL
 W PALM BCH FL** ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**D
 FITZGERALD, JOAN
 50 CAMDEN B CENTURY VILLAGE
 WEST PALM BEACH, FL. 33417** ☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: *SAL BUMMOLO* **SIGNATURE REQUIRED** **BUMMOLO** **1/17/01** **561-682-1801**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)

0003705

Attachment

742415

DD003828

ATTACH SHEET

TITLE

D

☒ ADDITION

NAME

CHEVRIER, JEAN

ST. ADDRESS

26 CAMDEN B CENTURY VILLAGE

CITY-ST. ZIP

WEST PALM BEACH, FL. 33417