

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 12, 2002 8:00 am
Secretary of State

02-12-2002 90114 043 ****61.25

DOCUMENT # 742670

1. Entity Name
AMERICANA VILLAGE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business 19800 S.W. 180 AVENUE SUITE #602 MIAMI FL 33187-2610	Mailing Address 19800 S.W. 180 AVENUE SUITE #602 MIAMI FL 33187-2610
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State
Zip	Country

4. FEI Number 59-2069462	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
**PAIGE, ROBERT M
 7000 SW 97TH AVE
 SUITE 209
 MIAMI FL 33173**

7. Name and Address of New Registered Agent
 Name: **Paige, Robert M.**
 Street Address (P.O. Box Number is Not Acceptable):
**9500 So. Dadeland Blvd.
 Suite 550**
 City: **Miami** FL Zip Code: **33156**

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 reinstating) DATE _____

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PATTENAUDE, ELIZABETH 19800 SW 180 AVE. #563 MIAMI FL 33187 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MAHNKE, BONNIE 19800 SW 180 AVE MIAMI FL 33187 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MD PASSINO, MARK 19800 SW 180TH AVE #246 MIAMI FL 33187 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WHITE, WILLIAM 19800 SW 180 AVE #036 MIAMI FL 33187 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BIRCH, HARRY 19800 SW 180TH AVE #444 MIAMI FL 33187 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MD WILCOX, BRIAN 19800 S.W. 180 AVE #375 MIAMI FL 33187 <input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Jerry Dale 19800 S.W. 180 Ave. #008 Miami, FL 33187 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Smiley Mort 19800 S.W. 180 Ave. #553 Miami, FL 33187 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY Olivia Gonzalez 19800 S.W. 180 Ave. #532 Miami, FL 33187 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Martha Hartley 19800 S.W. 180 Ave. #396 Miami, FL 33187 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MD Franklin Davis 19800 S.W. 180 Ave. #233 Miami, FL 33187 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MD Howard Eisold 19800 S.W. 180 Ave. #124 Miami, FL 33187 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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: **JERRY DALE** **1/24/02 305-378-4014**

CR2E037 (9/01)

Attachment
OC# 742670

313358

ADDITIONAL DIRECTORS:

MD
Benjamin Macias
19800 S.W. 180 Ave. ##149
Miami, FL 33187

MD
David Robbins
19800 S.W. 180 Ave. #127
Miami, FL 33187

MD
Margaret Schur
19800 S.W. 180 Ave. #385
Miami, FL 33187