

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 742739

1. Entity Name

ANDOVER B CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

ANDOVER B 36  
CENTURY VILLAGE  
WEST PALM BEACH FL 33417

Mailing Address

ANDOVER B 36  
CENTURY VILLAGE  
WEST PALM BEACH FL 33417

FILED  
Apr 12, 2001 8:00 am  
Secretary of State

04-12-2001 90176 020 \*\*\*\*\*61.25

LUU40506



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 59-1637719

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

HYMAN, HAAS  
37 ANDOVER B  
WEST PALM BEACH FL 33417

7. Name and Address of New Registered Agent

Name JAMES CAULFIELD (PRESIDENT)

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

36 ANDOVER B

City WEST PALM BEACH

FL

Zip Code 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 JAMES CAULFIELD

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

(NOTE: Registered Agent signature required when reinstating)

DATE

2-24-01

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 VPD  
NAME SNYDER, BERNIE  
STREET ADDRESS 37 ANDOVER B 31  
CITY-ST-ZIP W PALM BCH FL 33417 ☐ Delete

TITLE PD  
NAME HYMAN, HAAS  
STREET ADDRESS 37 ANDOVER B  
CITY-ST-ZIP WEST PALM BEACH FL 33417 ☒ Delete

TITLE ~~SB-DIRECTOR~~  
NAME FASSBINDER, RAE  
STREET ADDRESS 37 ANDOVER B 33  
CITY-ST-ZIP WEST PALM BEACH FL 33417 ☐ Delete

TITLE ~~B-TREASURER~~  
NAME LEVINE, ARTHUR  
STREET ADDRESS 37 ANDOVER B 34  
CITY-ST-ZIP E PALM BEACH FL 33417 ☐ Delete

TITLE SECRETARY  
NAME ALLYSON VOLEK  
STREET ADDRESS 36 ANDOVER B  
CITY-ST-ZIP W PALM BEACH, FL 33417 ☐ Delete

TITLE PRESIDENT  
NAME JAMES CAULFIELD  
STREET ADDRESS 36 ANDOVER B  
CITY-ST-ZIP W PALM BEACH, FL 33417 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

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

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ 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)(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 REGISTERED AGENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-24-01

CR2E037 (10/00)