

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 08, 2001 8:00 am
Secretary of State

02-08-2001 90148 014 ****70.00

DOCUMENT # 743826

1. Entity Name
MANGO LANE HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business MANGO LANE ESTATES 130 ST. S.W. 104 CT. MIAMI FL 33176 US	Mailing Address C/O HARVEY GOLDBERG 10325 S W 128TH TERRACE MIAMI FL 33176 US
--	--



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Ron Katz Suite, Apt. #, etc. 12927 SW. 103 PL	3. Mailing Address 12927 S.W. 103 PL Suite, Apt. #, etc.
City & State Miami Fla	City & State Miami Fla.
Zip 33176 Country USA	Zip 33176 Country USA

4. FEI Number **NOT APPLICABLE** Applied For Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**KALLICHE, ANTHONY A.
 6161 BLUE LAGOON DRIVE, SUITE #250
 MIAMI FL 33126**

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Numbers Not Acceptable)
N/A
 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 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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GOLDBERG, HARVEY 10325 S W 128TH TERRACE MIAMI FL 33176 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KATZ, RON 12927 S W 103 PLACE MIAMI FL 33176 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DUREMY, LINDA 12907 S W 163 PLACE MIAMI FL 33176 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DEUTSCH, ELEANOR 10424 S W 128TH TERRACE MIAMI FL 33176 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PARNESS, BARBARA 10444 S W 129TH TERRACE MIAMI FL 33176 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FURMAN, RICH 10404 S W 128TH TERRACE MIAMI FL 33176 <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Harvey Goldberg Same <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Ron Katz Same <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Andy Wolf Vice president 10464 SW. 129 Ave. Miami Fla. 33176 <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Mindy Notrika 10425 SW. 128 Ave. Miami Fla 33176 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Fran Jevcic 10324 S.W. 129 Ave Miami Fla. 33176 <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Byron Sharp 10364 SW. 128 Ave Miami Fla. 33176 <input type="checkbox"/> Change <input checked="" 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: **Eleanor Deutsch** **2-5-01** **233-0946**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)

Attachment
918787
#743826

NAME/ADDRESS	EXT
Director Peter Schosberg 12926 S.W. 104th Miami, Fla 33176	Office <input checked="" type="checkbox"/> Add. Fax Mobile Home
Director Jeff Steiner 12829 S.W. 103th Miami FL 33176	Office <input checked="" type="checkbox"/> Add. Fax Mobile Home
	Office Fax Mobile Home
	Office Fax Mobile Home
	Office Fax Mobile Home
	Office Fax Mobile Home
	Office Fax Mobile Home