

2002 UNIFORM BUSINESS REPORT (UBR)**FILED**
Mar 29, 2002 8:00 am
Secretary of State

03-29-2002 90364 001 *2,695.00

0072042

DOCUMENT # 744577

1. Entity Name

**VICTORIA VILLAGE "A" CONDOMINIUM ASSOCIATION, IN
C.**

Principal Place of Business

Mailing Address

**1310 AVENUE OF THE STARS
COCONUT CREEK FL 33066
US****1310 AVENUE OF THE STARS
COCONUT CREEK FL 33066
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1814459

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**RAVO, PAT T.
1310 AVENUE OF THE STARS
% WYNMOOR COMMUNITY COUNCIL, INC.
COCONUT CREEK FL 33066**

Name

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

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.259. 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	VPD	☐ Delete
NAME	STONE, SHIRLEY	
STREET ADDRESS	2804 H1 VICTORIA WAY	
CITY-ST-ZIP	COCONUT CREEK FL	

TITLE	VP	☐ Change ☒ Addition
NAME	SCHERTZ, LEE	
STREET ADDRESS	2804 VICTORIA WAY E-1	
CITY-ST-ZIP	COCONUT CREEK FL	

TITLE	SD	☐ Delete
NAME	BRODSKY, CHARLOTTE	
STREET ADDRESS	2804 M4 VICTORIA WAY	
CITY-ST-ZIP	COCONUT CREEK FL	

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

TITLE	TD	☐ Delete
NAME	ALPER, JERRY	
STREET ADDRESS	2804 VICTORIA WAY APT H3	
CITY-ST-ZIP	COCONUT CREEK FL 33066	

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

TITLE	PD	☐ Delete
NAME	GOLDSTEIN, GEORGE	
STREET ADDRESS	2804 F3 VICTORIA WAY	
CITY-ST-ZIP	COCONUT CREEK FL	

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

TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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

TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)