

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 21, 2001 8:00 am
Secretary of State

09-21-2001 90002 049 ****61.25

DOCUMENT # 747698
 1. Entity Name
THE EVERGLADES OF NORTH PALM BEACH CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business Mailing Address
372 Golfview Road, North Palm Beach, FL 33408

C0077052

2. Principal Place of Business 3. Mailing Address
372 Golfview Road Dicker, Krivok & Stoloff, P.A.
 Suite, Apt. #, etc. Suite, Apt. #, etc.
1818 Australian Ave. So., Ste. 400

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For
591980686 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
STEVE INGLIS, c/o Bristol Management Services, Inc. 103 U.S. 1F5-135 Jupiter, FL 33477
DICKER, KRIVOK & STOLOFF, P.A. 1818 Australian Avenue South Suite 400 West Palm Beach, FL 33409

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 *B. A. G. Esq.* DATE **9-14-01**

9. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
 FILE NOW: FEE IS \$61.25 Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE: PD <input checked="" type="checkbox"/> Delete	NAME: Frank H. Yurasko STREET ADDRESS: 374 Golfview Road, #502C CITY-ST-ZIP: North Palm Beach, FL 33408	TITLE: TD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME: Jamie Pereira STREET ADDRESS: 364 Golfview Road, #404A CITY-ST-ZIP: North Palm Beach, FL 33408
TITLE: D <input checked="" type="checkbox"/> Delete	NAME: Norman Johnson STREET ADDRESS: 364 Golfview Road, #303A CITY-ST-ZIP: North Palm Beach, FL 33408	TITLE: D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME: Frank Shelton STREET ADDRESS: 372 Golfview Road CITY-ST-ZIP: North Palm Beach, FL 33408
TITLE: D <input checked="" type="checkbox"/> Delete	NAME: Robert Hayes STREET ADDRESS: 364 Golfview Road, #301A CITY-ST-ZIP: North Palm Beach, FL 33408	TITLE: D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME: Joe Novarro STREET ADDRESS: 374 Golfview Road CITY-ST-ZIP: North Palm Beach, FL 33408
TITLE: D <input checked="" type="checkbox"/> Delete	NAME: Rae Hays STREET ADDRESS: 374 Golfview Road, #204C CITY-ST-ZIP: North Palm Beach, FL 33408	TITLE: D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME: Ralph Gilstrap STREET ADDRESS: 372 Golfview Road CITY-ST-ZIP: North Palm Beach, FL 33408
TITLE: SD <input type="checkbox"/> Delete	NAME: Grace Pallone STREET ADDRESS: 374 Golfview Road CITY-ST-ZIP: North Palm Beach, FL 33408	TITLE: VD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME: Joe Cummings STREET ADDRESS: 372 Golfview Road CITY-ST-ZIP: North Palm Beach, FL 33408
TITLE: VD <input type="checkbox"/> Delete	NAME: Jamie Pereira STREET ADDRESS: 364 Golfview Road, #404A CITY-ST-ZIP: North Palm Beach, FL 33408	TITLE: PD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME: Frank Ferolito STREET ADDRESS: 364 Golfview Road CITY-ST-ZIP: North Palm Beach, FL 33408

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 trustee 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 employment.

SIGNATURE: *[Signature]* DATE: **17SEP01** DAYTIME PHONE: **561-630-7136**

CR2E037 (11/00)