

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 24, 2003 8:00 am
Secretary of State

1/1

01-17-2003 90025 013 ****70.00

DOCUMENT # 748008

1. Entity Name
**EAST VIEW OF DELRAY BEACH CONDOMINIUM ASSOCIATIO
N, INC.**



Principal Place of Business
**2238 SPANISH TRAIL A
DELRAY BEACH FL 33483**

Mailing Address
**2238 SPANISH TRAIL A
DELRAY BEACH FL 33483**

2. Principal Place of Business
2238 SPANISH TRAIL A

3. Mailing Address
2238 SPANISH TRAIL

Suite, Apt. #, etc.
1

Suite, Apt. #, etc.
1

City & State
DELRAY BEACH, FLORIDA

City & State
DELRAY BEACH, FLORIDA

4. FEI Number **65-0221479**

Applied For
 Not Applicable

Zip **33483** Country **FLORIDA**

Zip **33483** Country **USA**

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

**GARNETT, EDWARD
2238-A SPANISH TRAIL
DELRAY BEACH FL 33483**

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. I am familiar with, and accept the obligations of registered agent.

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 \$61.25

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **SP** Delete
NAME **GARNETT, EDWARD**
STREET ADDRESS **2238 SPANISH TRAIL A**
CITY-ST-ZIP **DELRAY BEACH FL 33483**

TITLE ~~ANTHONY SPANETT~~ Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **T** Change Addition
NAME **MICHAEL GARNETT**
STREET ADDRESS **2238 SPANISH TRAIL A**
CITY-ST-ZIP **DELRAY BEACH, FL 33483**

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ~~T~~ Change Addition
NAME ~~MICHAEL SPANETT~~
STREET ADDRESS **2238 SPANISH TRAIL A**
CITY-ST-ZIP **DELRAY BEACH, FL 33483**

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** Change Addition
NAME **EDWARD GARNETT**
STREET ADDRESS **2238 SPANISH TRAIL A**
CITY-ST-ZIP **DELRAY BEACH, FL 33483**

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 REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____ Daytime Phone # _____

1-7-03 954-663-4153

CR2E037 (10/02)