

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 749120

1. Entity Name

ANTIGUA VILLAGE II CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

1310 AVENUE OF THE STARS
COCONUT CREEK FL 33066-1453
US

Mailing Address

1310 AVENUE OF THE STARS
COCONUT CREEK FL 33066-1485
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-1941222

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 \$61.25

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE VD ☐ Delete
NAME KUSHNER, PAUL
STREET ADDRESS 2402 D3 ANTIGUA CIRCLE
CITY-ST-ZIP COCONUT CREEK FL

TITLE P/D ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME KRUH, ESTELLE
STREET ADDRESS 2405 L-3 ANTIGUA CIRCLE
CITY-ST-ZIP COCONUT CREEK FL

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

TITLE T ☐ Delete
NAME DEVOS, HERBERT
STREET ADDRESS 2403 E1 ANTIGUA CIR.
CITY-ST-ZIP COCONUT CREEK FL

TITLE T/D ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE P ☐ Delete
NAME FRISCH, JEAN
STREET ADDRESS 2401 L4 ANTIGUA CIRCLE
CITY-ST-ZIP COCONUT CREEK FL

TITLE V/D ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DS ☐ Delete
NAME LEMUS, JOSEPH
STREET ADDRESS 2404 N-3 ANTIGUA CIRCLE
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

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:

Paul T. Ravo
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/28/00

Date

(954) 978-2600

Daytime Phone #

CR2E037 (9/99)