2002 UNIFORM BUSINESS REPORT (UBR) **FILED DOCUMENT # 750083** Jun 20, 2002 8:00 am 1. Entity Name Secretary of State THE HARVEST CONDOMINIUM ASSOCIATION, INC. 06-20-2002 90056 005 ****61.25 Principal Place of Business Mailing Address 2900 SW 87 TERRACE 2900 SW 87 TERRACE DAVIE FL 33328-6613 DAVIE FL 33328-6613 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 59-2698903 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent POLIAKOFF, GARY A. Street-Address (P.O.Box Number is Not Acceptable, BECKER & POLIAKOFF, P.A. 3111 STIRLING RD. FT. LAUDERDALE FL 33312 Zip Cage FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state or Florica. SIGNATURE (NOTE; Registered Agent signature required when reinstating) DATE FIFTYOVEREESKS KE 9. Election Campaign Financing Make Grecki Payrible to Department of State \$5.00 May Be Trust Fund Contribution. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE Delete TITLE NAME ☐ Change MCCLAIN, MARCIA NAME STREET ADDRESS 2930 SW 87TH TERR #1803 STREET ADDRESS CITY-ST-ZIP DAVIE FL 33328 CITY+ST-ZIP TITLE VD Delete TITLE Addition (E ☐ Change HAME JEGERS, MARTIN COHEN, JAMES 2930 SW 87TH TERR. #1806 STREET ADDRESS 8701 SW 30TH ST., #205 STREET ADDRESS CITY-ST-ZIP DAVIE FL 33328 CITY-ST-ZIP DAVIE, FL 33328 TITLE Delete TITLE ★ Addition KICKBUSH, BRIAN HAME MILLER, TERRY NAME TREET HOCHESS 2801 S.W. 87TH AVE., ≠1003 29110-SW-87TH TERR -- #1705 STREET ADDRESS CITY-ST-ZIP DAVIE FL CITY-ST-ZIP DAVIE, FL 33328 TITLE Delete TITLE HAME HEWITT, JAMES NAME OLSON, NANCY 2961 SW 87TH AVE. #1101 STREET ADDRESS 2910 SW 87 TERR #1708 STREET ADDRESS DITY-ST-ZIP DAVIE FL 33328 CITY-ST-ZIP DAVIE, FL 33328 TITLE ☐ Defete TITLE R7 Channe ☐ Addition NAME SHIELDS, SHARON NAME SHIELDS, SHARON STREET ADDRESS 2930 S.W. 87TH TER., #1802 STREET ADDRESS 2930 SW 87TH TER. #1802 CITY-ST-71P DAVIE FL CITY-ST-ZIP DAVIE FL 33328 INTE ☐ Delete TITLE Addition VUOLO, RENE C. NAME NAME VUOLO, RENE C. 2911 SW_87TH TERR. #1605 STREET ADDRESS 2911 S.W. 87TH TERRACE, #1605 STREET ADDRESS

CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 changed, or on an attachment with an address, with all other like empowered.

DAVIE.

DAVIE FL

SIGNATURE: POP



2900 S.W. 87th Terrace Davie, FL 33328

(954) 476-8784 Fax (954) 476-7699

June 12, 2002

Florida Department of State **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

> Re: 2002 Uniform Business Report The Harvest Condominium Association, Inc. Document #750083 FEI # 59-2698903

Gentlemen:

On March 25, 2002, our office mailed to you the executed UBR described above, together with our check #5961 in the amount of \$61.25. Since, after 2 months, we had not received from our bank the cancelled check, we telephoned your offices and we were informed that the same was never received by you. Enclosed find copies of the original form and check which we mailed in your pre-addressed envelope.

In accordance with the instructions from your office, we enclose herewith, replacement check #6076 together with a copy of the UBR for filing which, we trust, you will accept as a valid report to replace the original which appears to have been lost.

Sincerely.

THE HARVEST CONDOMINIUM

Marcia McClain, Manager

Enclosure: Copy of UBR and check #5961 dated:3/25/02 Check #6076 for \$61.25 and

copy of UBR for filing

1. Entity Name THE HAR	MENT # 750083 EVEST CONDOMINIUM ASSO		ORT (UB	Service .	Atlac	hn	ient
Principal Place	of Business	Mailing Address	7.		11 000	7144	
2900 SW 87 TEF DAVIE FL 33328-		2900 SW 87 TERRACE DAVIE FL 33328-6613			17		
2. Principal Pla	ace of Business	3. Mailing Address				;	
Suite, Apt. #	i, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN TH	CDACE	
City & State		City & State			4. FEI Number		
Zip	Country	Zip	Country		59-2698903		Applied For Not Applicable
	6. Name and Address of Current F				5. Certificate of Status Desired	\$8.75 A	dditional red
	The state of the s	edizreled where	Name		7. Name and Address of New Register	ed Agent	
POLIAKOFF, BECKER & F	POLIAKOFF, P.A.	Street Add		Address (P.	ss (P.O. Box Number is Not Acceptable)		
	ING RD. RDALE FL 33312 named entity submits this statement for	·	City		F	Zip Co	xde
	Ignature, typed or privide name of registered agent an	9. Election Cam	E: Registered Agent signatu	ure required wi		E	State a State of a state of
	OFFICERS AND DIDE	Trust Fund Co	Contribution.	A	《西西·西西·西西·西西	កោរ (ទីនៀត <u>)</u>	Control of the second
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2/25/02

SIGNATURE: POPO ON A SOCIAL SO

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J.

Attachment 870147 #750083

850 245-6059

EI # 59-2698903

NON-NEGOTIABLE

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