

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

**FILED**  
**May 13, 2002 8:00 am**  
**Secretary of State**

05-13-2002 90093 011 \*\*\*\*61.25

DOCUMENT # 751130

1. Entity Name

*Chelsea Bayview Condominium Assn, Inc.*

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

3. Mailing Address

*1913 South Ocean Drive*

*C/O The Conterra Group*

Suite, Apt. #, etc.

Suite, Apt. #, etc.

*Office*

*2950 N. 28th Terr*

City & State

City & State

*Hollandale Beach, FL*

*Hollywood FL*

Zip

Country

Zip

Country

*33009*

*USA*

*33020*

*USA*

DO NOT WRITE IN THIS SPACE

4. FEI Number

*591989353*

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

7. Name and Address of Current Registered Agent

Name

*Mary Gary*

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

*150 W. Flagler Street*

City

*Miami, FL*

FL

Zip Code

*33130*

**DO NOT WRITE  
IN THIS SPACE**

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

**FEE IS \$61.25**  
**Initial or Amended UBR**

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>President Frederick Spillner 1913 S. Ocean Dr. #204 Hollandale FL 33009</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Vice President Helene Spillner 1913 S. Ocean Drive #204 Hollandale Beach FL 33009</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Secretary Annette Sporn 1913 S. Ocean Drive #102 Hollandale Beach FL 33009</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Treasurer Jeanette Sadowsky 1913 S. Ocean Drive #411 Hollandale Beach FL 33009</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Director Guido Mucci 1913 S. Ocean Drive #336 Hollandale Beach FL 33009</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Director Richard Pusatelli 1913 South Ocean Drive #415 Hollandale Beach FL 33009</i>

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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

*Frederick Spillner Pres*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*4/20/02 (954) 56-0061*

Date Daytime Phone #

CR2E037B (12/01)