

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 21, 2002 8:00 am**  
**Secretary of State**

05-21-2002 91203 013 \*\*\*\*61.25

**DOCUMENT # 751991**

1. Entity Name

**SHORE SIDE CONDOMINIUM ASSOCIATION, INC.**

Principal Place of Business

Mailing Address

**ASSOCIATED PROP MGMT  
 400 S DIXIE HWY #10  
 LAKE WORTH FL 33460**

**ASSOCIATED PROP MGMT  
 400 S DIXIE HWY #10  
 LAKE WORTH FL 33460**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

**720 N. Dixie Hgwy**  
 Suite, Apt. #, etc.

**c/o Procam Management**  
 Suite, Apt. #, etc.  
**PO Box 3097**

City & State

City & State

4. FEI Number

**59-2040379**

Applied For

Not Applicable

**Lantana**

**Boynton Beach, FL**

Zip

Country

Zip

Country

5. Certificate of Status Desired

**\$8.75 Additional Fee Required**

**33462**

**33424**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ASSOCIATED PROPERTY MANAGEMENT  
 400 S DIXIE HWY #10  
 LAKE WORTH FL 33460**

Name  
**PROCAM MANAGEMENT, INC.**  
 Street Address (P.O. Box Number is Not Acceptable)  
**8887-B Thumbwood Circle**  
 City  
**Boynton Beach** **FL** Zip Code  
**33424**

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

*[Handwritten 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 NAME STREET ADDRESS CITY-ST-ZIP	VPD SIIKANEN, PENTTI 720 NORTH DIXIE HWY #104 LANTANA FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GENEVIEVE, FRANK 720 NORTH DIXIE HWY #305 LANTANA FL 33462	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD JONES, RICHARD 720 NORTH DIXIE HWY #702 LANTANA FL 33462	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD KARLSEN, VICTORIA 720 NORTH DIXIE HWY #301 LANTANA FL 33462	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD SIIKANEU, PENTT 6874 BIG PINE KEY ST LAKE WORTH FL 33467	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ARREDONDO, JORGE 720 NORTH DIXIE HWY #402 LANTANA FL 33462	<input checked="" type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PARATORE, RAJA 720 N. Dixie Hgwy, #206 Lantana, FL 33462	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD PIIRA, PETER 720 N Dixie Hgwy, #302 Lantana, FL 33462	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ARREDONDO, JORGE 720 N Dixie Hwy., #402 Lantana, FL 33462	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SIIKANEN, PENTTI 232 Glen Eagles Drive Atlantis, FL 33462	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ARREDONDO, JORGE 720 NORTH DIXIE HWY #402 LANTANA FL 33462	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Raja Paratore* DE RAJA PARATORE PRES. 4/24/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)