

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 28, 2002 8:00 am
Secretary of State

02-28-2002 90072 001 ****61.25

0038035

DOCUMENT # 760370

1. Entity Name

3120 CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

**3120 S. OCEAN BLVD.
 PALM BEACH FL 33480**

**3120 S. OCEAN BLVD.
 PALM BEACH FL 33480**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2256948

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
 Fee Required**



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ASHMEAD, SHIRLEY A
 3120 S OCEAN BLVD
 PALM BCH FL 33480**

Name **Steven J. Whitehurst**

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

3120 S Ocean Blvd

City **Palm Beach**

FL

Zip Code **33480**

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

Steven J. Whitehurst, Manager *Steven J. Whitehurst* **2-7-02**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-stating)

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	P	<input type="checkbox"/> Delete
NAME	FALK, MARSHALL A	
STREET ADDRESS	3120 S OCEAN BLVD	
CITY-ST-ZIP	PALM BCH. FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	ROSS, MARTIN	
STREET ADDRESS	3120 S OCEAN BLVD.	
CITY-ST-ZIP	PALM BCH. FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	BEAUDOUIN, JOHN T	
STREET ADDRESS	3120 S OCEAN BLVD	
CITY-ST-ZIP	PALM BEACH FL	
TITLE	T	<input type="checkbox"/> Delete
NAME	CORDES, LEONARD	
STREET ADDRESS	3120 S. OCEAN BLVD.	
CITY-ST-ZIP	PALM BEACH FL	
TITLE	S	<input type="checkbox"/> Delete
NAME	DR. HANS, BAUMAN	
STREET ADDRESS	3120 S. OCEAN BLVD.	
CITY-ST-ZIP	PALM BEACH FL 33480	
TITLE	D	<input type="checkbox"/> Delete
NAME	Goldstein, Lee	
STREET ADDRESS	3120 S. Ocean Blvd	
CITY-ST-ZIP	Palm Beach, FL 33480	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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:

Leonard Cordes **LEONARD CORDES**

FEB. 8. 2007

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)