

**2002 UNIFORM BUSINESS REPORT (UBR)**

3/2

**FILED**  
**Apr 23, 2002 8:00 am**  
**Secretary of State**

03-29-2002 90364 001 \*2,695.00

**DOCUMENT # 762974**

1. Entity Name

**GRANADA VILLAGE CONDOMINIUM ASSOCIATION, INC.**

Principal Place of Business

Mailing Address

1310 AVENUE OF THE STARS  
 COCONUT CREEK FL 33066  
 US

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 COCONUT CREEK FL 33066  
 US

24935



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number		Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		59-2059707		Not Applicable	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
Zip	Country	Zip	Country				

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	

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**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	D	<input type="checkbox"/> Delete	TITLE	VPD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TISHBERG, MURRAY		NAME	ZWEBEN, DONNA	
STREET ADDRESS	2001 D-1 GRANADA DR		STREET ADDRESS	2006 GRANADA DR. APT. A3	
CITY-ST-ZIP	COCONUT CREEK FL		CITY-ST-ZIP	COCONUT CREEK FL 33066	
TITLE	D	<input type="checkbox"/> Delete	TITLE	VPDT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FRIEDMAN, HY		NAME		
STREET ADDRESS	2003 L-1 GRANADA DR		STREET ADDRESS		
CITY-ST-ZIP	COCONUT CREEK FL		CITY-ST-ZIP		
TITLE	PD	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLOOM, CHARLES		NAME		
STREET ADDRESS	2008 B-1 GRANADA DR		STREET ADDRESS		
CITY-ST-ZIP	COCONUT CREEK FL		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SHAREFF, BENJAMIN		NAME		
STREET ADDRESS	2204 GRANADA DRIVE APT K3		STREET ADDRESS		
CITY-ST-ZIP	COCONUT CREEK FL		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STURM, SY		NAME		
STREET ADDRESS	2002 GRANADA DRIVE APT C3		STREET ADDRESS		
CITY-ST-ZIP	COCONUT CREEK FL 33066		CITY-ST-ZIP		
TITLE	VP	<input type="checkbox"/> Delete	TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CAPLAN, NATE		NAME		
STREET ADDRESS	2005 GRANADA DRIVE APT D-1		STREET ADDRESS		
CITY-ST-ZIP	COCONUT CREEK FL		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 life empowered.

SIGNATURE: \_\_\_\_\_

**SIGNATURE REQUIRED**  
Signature, typed or printed name of officer or director

*1/2/02*

Daytime Phone # \_\_\_\_\_

CR2E037 (9/01)