

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 09, 2002 8:00 am
Secretary of State

04-09-2002 90726 025 ****61.25

DOCUMENT # 767482

1. Entity Name

UNIVERSITY MAPLEWOOD TOWNHOUSES ASSOCIATION, INC

Principal Place of Business

Mailing Address

9698 N.W. 14TH STREET
 CORAL SPRINGS FL 33071

9698 N.W. 14TH STREET
 CORAL SPRINGS FL 33071

2. Principal Place of Business

3. Mailing Address

9365 W. SAMPLE ROAD

9365 W. SAMPLE ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

203

203

City & State

City & State

CORAL SPRINGS, FL

CORAL SPRINGS, FL

Zip

Country

Zip

Country

33065

US

33065

US

4. FEI Number

59-2512205

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

SAATHOFF, ANNE M.
 9365 W. SAMPLE ROAD #203
 CORAL SPRINGS FL 33065

Name

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

City

FL

Zip Code

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

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: VPD
 NAME: MITCHELL, FRED Delete
 STREET ADDRESS: 9754 NW 14TH STREET
 CITY-ST-ZIP: CORAL SPRINGS FL

TITLE: PD
 NAME: SIANSKY, LARRY Change Addition
 STREET ADDRESS: 9365 W. SAMPLE ROAD #203
 CITY-ST-ZIP: CORAL SPRINGS, FL 33065

TITLE: SD
 NAME: SIEBORT, DEBORAH Delete
 STREET ADDRESS: 9724 NW 14 ST
 CITY-ST-ZIP: CORAL SPRINGS FL

TITLE: VD
 NAME: MITCHELL, FRED Change Addition
 STREET ADDRESS: 9365 W. SAMPLE ROAD #203
 CITY-ST-ZIP: CORAL SPRINGS, FL 33065

TITLE: TD
 NAME: SMITH, PATRICIA Delete
 STREET ADDRESS: 9784 N.W. 14TH STREET
 CITY-ST-ZIP: CORAL SPRINGS FL

TITLE: SD
 NAME: SIEBERT, DEBORAH Change Addition
 STREET ADDRESS: 9365 W. SAMPLE ROAD #203
 CITY-ST-ZIP: CORAL SPRINGS, FL 33065

TITLE: PD
 NAME: PALERMO, TERESA Delete
 STREET ADDRESS: 9808 NW 14TH ST
 CITY-ST-ZIP: CORAL SPRINGS FL

TITLE: TD
 NAME: SMITH, PATRICIA Change Addition
 STREET ADDRESS: 9365 W. SAMPLE ROAD #203
 CITY-ST-ZIP: CORAL SPRINGS, FL 33065

TITLE: D
 NAME: SIANSKY, LARRY Delete
 STREET ADDRESS: 9728 NW 14 ST
 CITY-ST-ZIP: CORAL SPRINGS FL

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

TITLE: Delete
 NAME: Delete
 STREET ADDRESS: Delete
 CITY-ST-ZIP: Delete

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change 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:

Signature Required

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

954-752-4796

Daytime Phone #

0020296

CR2E037 (9/01)