

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 19, 2000 8:00 am
Secretary of State

07-19-2000 90022 049 ****61.25

DOCUMENT # 770251

1. Entity Name

DEERFIELD BEACH HOUSE CONDOMINIUM ASSOCIATION, I ✓

Principal Place of Business

Mailing Address

330 S.E. 20TH AVE.
 DEERFIELD BEACH FL 33441

330 S.E. 20TH AVE.
 DEERFIELD BEACH FL 33441

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

BROWARD

Zip

Country

BROWARD

4. FEI Number

59-2724264

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

~~CORRECT SPELLING~~
LERIN, CHERYL P.A.
 10226 NE 47TH STREET
 SUNRISE FL 33351

Name **CHERYL J. LEVIN, P.A.**

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
After September 13, 2000 min. will be \$236.25

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** Delete
 NAME **BUMPUS, FRANCIS**
 STREET ADDRESS **330 SE 20TH AVE #113**
 CITY-ST-ZIP **DEERFIELD BCH. FL**

TITLE **D & TREAS** Change Addition
 NAME **HUDDLESTON, ROBERT E**
 STREET ADDRESS **330 SE 20TH AVE. APT. 208**
 CITY-ST-ZIP **DEERFIELD BCH, FL 33441**

TITLE **PT** Delete
 NAME **BERNSTEIN, MENDEL**
 STREET ADDRESS **330 SE 20TH AVE #501**
 CITY-ST-ZIP **DEERFIELD BEACH FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **VPSD** Delete
 NAME **SALVO, NORMA**
 STREET ADDRESS **330 SE 20TH AVE #216**
 CITY-ST-ZIP **DEERFIELD BEACH FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
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TITLE Delete
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TITLE Delete
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 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change 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: ROBERT E. HUDDLESTON
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/7/00
 Date

954-426-4962
 Daytime Phone #

CR2E037 (5/00)