

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2001 8:00 am
Secretary of State

02-02-2001 90284 025 ****61.25

DOCUMENT # N00000000919

1. Entity Name

SONOMA TOWNHOMES AT DORAL COMMUNITY ASSOCIATION, ✓

Principal Place of Business

Mailing Address

760 NW 107 AVENUE
SUITE 201
MIAMI FL 33172

760 NW 107 AVENUE
SUITE 201
MIAMI FL 33172

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

65-9986353

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

KTG&S REGISTERED AGENT CORPORATION
100 SE SECOND ST
SUITE 2800
MIAMI FL 33131

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 PD
NAME ~~REBUCK, JOSEPH O~~ Delete
STREET ADDRESS 760 NW 107 AVE SUITE 201
CITY-ST-ZIP MIAMI FL 33172

TITLE VD
NAME CRUZ, DEANNA P Delete
STREET ADDRESS 760 NW 107 AVENUE
CITY-ST-ZIP MIAMI FL 33172

TITLE STD
NAME ERIZARY, RUSSELL Delete
STREET ADDRESS 760 NW 107 AVENUE
CITY-ST-ZIP MIAMI FL 33172

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE PD
NAME DR. GOTTLIEB, PAULA Change Addition
STREET ADDRESS 760 NW 107 AVE SUITE 201 D
CITY-ST-ZIP MIAMI FL 33172

TITLE V.P. D
NAME ERIZARY, RUSSELL Change Addition
STREET ADDRESS 760 NW 107 AVE SUITE 201 D
CITY-ST-ZIP MIAMI FL 33172 D

TITLE VILLARD, JESSIE D. Change Addition
NAME
STREET ADDRESS 760 NW 107 AVE SUITE 201 D
CITY-ST-ZIP MIAMI FL 33172 D

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

SIGNATURE

1/2/01

CR2E037 (10/00)