2002 UNIFORM BUSINESS REPORT (UBR)

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FILED
Mar 14, 2002 8:00 am
Secretary of State
01-21-2002 90023 017 ****61.25

DOCUMENT # N00000003875

1. Entity Name

FLEISCHMANN OFFICE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
2419 1 FLEISCHMANN RD TALLAHASSEE FL 32308	PO BOX 4181 TALLAHASSEE FL 32315

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3678886 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
VOLLMER, DAN 1435 E PIEDMONT DR STE 202 TALLAHASSEE FL 32308	Name MELVIN YOUMAN Street Address (P.O. Box Number is Not Acceptable) 2419 Fleischmann Rd, UNIT 3 City TALLAHASSEE FL Zip Code 32308

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	☐ Delete	PRESIDENT / DIRECTOR	☐ Change ☒ Addition
NAME	ROSEN, PETER S		Robyn Rennick
STREET ADDRESS	P.O. BOX 15694		2417 Fleischmann Rd, UNIT 2
CITY-ST-ZIP	TALLAHASSEE FL 32308		Tallahassee, FL 32308
TITLE	VD	☒ Delete	VICE PRESIDENT / DIRECTOR	☐ Change ☒ Addition
NAME	BASTAIN, TONY		JOAN MANCEBO
STREET ADDRESS	3375-H CAPITAL CIR NE		2419 FLEISCHMANN Rd, UNIT 2
CITY-ST-ZIP	TALLAHASSEE FL 32308		Tallahassee, FL 32308
TITLE	STD	☒ Delete	Secretary Director	☐ Change ☒ Addition
NAME	VOLLMER, DAN		JERI R. PARRISH
STREET ADDRESS	P.O. BOX 4181		2417 FLEISCHMANN Rd, UNIT 4
CITY-ST-ZIP	TALLAHASSEE FL 32315		TALLAHASSEE, FL, 32308
TITLE		☐ Delete	TREASURER / DIRECTOR	☐ Change ☒ Addition
NAME			MELVIN YOUMAN
STREET ADDRESS			2419 FLEISCHMANN Rd, UNIT 3
CITY-ST-ZIP			TALLAHASSEE, FL 32308
TITLE		☐ Delete		☐ Change ☐ Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		☐ Delete		☐ 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 REQUIRED DAN VOLLMER SEC. 1/10/02 850 386-1158
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/01)