

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 25, 2002 8:00 am
Secretary of State

02-25-2002 90084 026 ****61.25

DOCUMENT # N00100

1. Entity Name

ROSEWOOD CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

9893 THREE LAKES CR
 BOCA RATON FL 33428
 US

C/O TRIDENT PROPERTIES MANAGEMENT COMPANY
 1000 HOLLAND DRIVE, SUITE 5
 BOCA RATON FL 33487

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

59-2377963

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

LEVINE, MICHAEL
 9893 THREE LAKES CR
 BOCA RATON FL 33428

Name **TRIDENT PROPERTIES MANAGEMENT**

Street Address (P.O. Box Number is Not Acceptable)
1000 HOLLAND DRIVE, SUITE # 12

City **BOCA RATON**

FL

Zip Code **33487**

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]

Michael Broderick

2/12/02

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	P	NAME	LEVINE, MICHAEL	<input checked="" type="checkbox"/> Delete
STREET ADDRESS			9893 THREE LAKES CR	
CITY-ST-ZIP			BOCA RATON FL 33428	
TITLE	D	NAME	BANDLER, BARRY	<input type="checkbox"/> Delete
STREET ADDRESS			9963 THREE LAKES CIRCLE	
CITY-ST-ZIP			BOCA RATON FL 33486	
TITLE	D	NAME	BUNNEY, CATHERINE	<input type="checkbox"/> Delete
STREET ADDRESS			9979 THREE LAKES CIRCLE	
CITY-ST-ZIP			BOCA RATON FL 33486	
TITLE	D	NAME	SEELEY, YOLANDA	<input type="checkbox"/> Delete
STREET ADDRESS			9863 THREE LAKES CIRCLE	
CITY-ST-ZIP			BOCA RATON FL 33486	
TITLE		NAME		<input type="checkbox"/> Delete
STREET ADDRESS				
CITY-ST-ZIP				
TITLE		NAME		<input type="checkbox"/> Delete
STREET ADDRESS				
CITY-ST-ZIP				

TITLE	VP	NAME	Aage Hanson	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS			9973 Three Lakes Circle	
CITY-ST-ZIP			BOCA RATON, FL 33428	
TITLE	P	NAME	BARRY Bandler	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS			9963 Three Lakes Circle	
CITY-ST-ZIP			BOCA RATON, FL 33428	
TITLE	D	NAME	Gene Curry Currie	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS			9971 Three Lakes Circle	
CITY-ST-ZIP			BOCA RATON, FL 33428	
TITLE	D	NAME	Sonia Andrade	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS			9837 Three Lakes Circle	
CITY-ST-ZIP			BOCA RATON, FL 33428	
TITLE		NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS				
CITY-ST-ZIP				
TITLE		NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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] **SIGNATURE REQUIRED** **Pr65**

2-8-02

CR2E037 (9/01)