

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 29, 2001 8:00 am
Secretary of State

03-29-2001 90025 005 ****61.25

DOCUMENT # N01565
 1. Entity Name
COVES AT ABERDEEN CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business C/O CMD MANAGEMENT INC. 3082 JOG RD LAKE WORTH FL 33467 US	Mailing Address C/O CMD MANAGEMENT INC. 3082 JOG RD LAKE WORTH FL 33467
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2. Principal Place of Business <i>C/O G.R.S Management Associates, Inc.</i>	3. Mailing Address <i>Same</i>
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Suite, Apt. #, etc. <i>3900 Woodlake Blvd Ste 201</i>	Suite, Apt. #, etc.
City & State <i>Lake Worth FL</i>	City & State
Zip <i>33463</i>	Country <i>USA</i>

4. FEI Number 59-2641942	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
ROSENTHAL, DAVID C
 C/O MANAGEMENT INC.
 3082 JOG RD.
 LAKE WORTH FL 33467

7. Name and Address of New Registered Agent
 Name: **ST-JOHN, DICKER KRIVON & CORE P.A.**
 Street Address (P.O. Box Number is Not Acceptable):
500 Australian Ave South
STE 600
 City: **West Palm Bch** FL Zip Code: **33401**

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: *David A. Core* **DAVID A. CORE, SECRETARY** **3-21-01**
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. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS

TITLE NAME	PD MARINI, VINCENT	<input type="checkbox"/> Delete
STREET ADDRESS	5853 PARKWALK DR	
CITY-ST-ZIP	BOYNTON BEACH FL 33437	
TITLE NAME	VD WARREN, BOB	<input type="checkbox"/> Delete
STREET ADDRESS	5373 PARKWALK DRIVE	
CITY-ST-ZIP	BOYNTON BEACH FL 33437	
TITLE NAME	SD SHOGOL, MILLY	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	6077 PARKWALK DRIVE	
CITY-ST-ZIP	BOYNTON BEACH FL	
TITLE NAME	TD MC NAMEE, BILL	<input type="checkbox"/> Delete
STREET ADDRESS	5969 PARKWALK DR	
CITY-ST-ZIP	BOYNTON BEACH FL 33437	
TITLE NAME	D TOBACK, JOSEPH	<input type="checkbox"/> Delete
STREET ADDRESS	5807 PARKWALK DR	
CITY-ST-ZIP	BOYNTON BEACH FL 33437	
TITLE NAME	VD KRASNEY, HY	<input type="checkbox"/> Delete
STREET ADDRESS	5957 PARKWALK DR	
CITY-ST-ZIP	BOYNTON BEACH FL 33437	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME	SD HOCK, MORTON	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	5871 Parkwalk Drive	
CITY-ST-ZIP	Boynton Bch, FL 33437	
TITLE NAME	D BAUMAN, Doris	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	6003 Parkwalk Drive	
CITY-ST-ZIP	Boynton Bch, FL 33437	

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: *Vincent E. Marini* **VINCENT E. MARINI** **736-3906** **3/16/01**
Signature and typed or printed name of signing officer or director. Date Daytime Phone #

CR2E037 (10/00)