

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 19, 2002 8:00 am
Secretary of State

02-19-2002 90113 032 ****61.25

DOCUMENT # N07493

1. Entity Name

KARANDA VILLAGE V CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

% CASTLE PROPERTY SERVICES
 4450 SUNRISE BLVD.
 PLANTATION FL 33313

% CASTLE PROPERTY SERVICES
 4450 SUNRISE BLVD.
 PLANTATION FL 33313

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2502042

Applied For

Not Applicable

Zip

Country

Zip

Country

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

KATZMAN & KORR
1100 S. STATE ROAD 7
SUITE 102
MARGATE FL 33068

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	STD	<input checked="" type="checkbox"/> Delete
NAME	SEVRANSKY, WILLIAM	
STREET ADDRESS	3285 NW 47 AVE	
CITY-ST-ZIP	COCONUT CREEK FL 33063	
TITLE	D	<input type="checkbox"/> Delete
NAME	GRASSE, GREGORY	
STREET ADDRESS	3320 NW 47 AVE	
CITY-ST-ZIP	COCONUT CREEK FL 33063	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	CUDEBACK, CURTIS	
STREET ADDRESS	831 LYONS RD #23102	
CITY-ST-ZIP	COCONUT CREEK FL 33063	
TITLE	D	<input type="checkbox"/> Delete
NAME	LANEY, ROBERT	
STREET ADDRESS	3480 NW 47 AVE	
CITY-ST-ZIP	COCONUT CREEK FL 33063	
TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	KRUPIN, ROBERT	
STREET ADDRESS	3321 NW 47 AVE	
CITY-ST-ZIP	COCONUT CREEK FL 33063	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	STD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ZORNICK, JOSEPH	
STREET ADDRESS	3437 NW 47 th AVE.	
CITY-ST-ZIP	COCONUT CREEK, FL 33063	
TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ARIALE, DOMINIC	
STREET ADDRESS	3296 NW 47 AVE.	
CITY-ST-ZIP	COCONUT CREEK FL 33063	
TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LATTANZI, DINO	
STREET ADDRESS	3394 NW 47 AVE	
CITY-ST-ZIP	COCONUT CREEK, FL 33063	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 Laney
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Robert Laney
 PRESIDENT 1/17/02 954-972-4601

CRZE037 (9/01)