2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 11, 2002 8:00 am
Secretary of State
02-11-2002 90023 040 ****61.25

DOCUMENT # N17885

1. Entity Name

BUCKINGHAM AT CENTURY VILLAGE CONDOMINIUM #II AS SOCIATION, INC.

Principal Place of Business	Mailing Address
ARISTA SOUTH 12229 PEMBROKE RD. PEMBROKE PINES FL 33025	ARISTA SOUTH 12229 PEMBROKE RD. PEMBROKE PINES FL 33025

DO NOT WRITE IN THIS SPACE

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 65-0035398 ☐ 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
DAVIS, CHARLES 12229 PEMBROKE RD. PEMBROKE PINES FL 33025	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 / NAME / STREET ADDRESS / CITY-ST-ZIP	DP ELLMAN, ENID 901 SW 128TH AVE PEMBROKE PINES FL 33027	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD GUZIK, GILBERT 701 SW 128TH AVE PEMBROKE PINES FL 33027	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP HYMES, MARION 12800 SW 7 CT G- 105 PEMBROKE PINES FL 33027	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/P HYMES, MARION	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DPT JANU, RUDOLPH P 701 SW 128 AVENUE F 104 HOLLYWOOD FL 33027	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/V JANU, RUDOLPH P Pembroke Pines	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS HEYMAN, RUTH 901 SW 128 AVE E- 306 HOLLYWOOD FL 33027	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/S/T HEYMAN, RUTH Pembroke Pines	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

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 Marion Hymes 1/26/02 (954) 436-5888
SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER, DIRECTOR OR AGENT DATE