2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 27, 2003 8:00 am
Secretary of State
01-16-2003 90096 031 ****61.25

DOCUMENT # N17885

1. Entity Name

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

Principal Place of Business	Mailing Address
13460 SW 10 STREET SUITE 101 PEMBROKE PINES FL 33027	13460 SW 10 STREET SUITE 101 PEMBROKE PINES FL 33027

☐ CHECK HERE IF MAKING CHANGES

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

DAVIS, CHARLES
12229 PEMBROKE RD.
PEMBROKE PINES FL 33025

7. Name and Address of New Registered Agent

Name: DAVIS, CHARLES W
Street Address (P.O. Box Number is Not Acceptable): 13460 SW 10 ST.
Suite 101
City: Pembroke Pines FL Zip Code: 33027

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Charles W Davis 1-6-03
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 Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP HYMES, MARION 12800 SW 7 CT G- 105 PEMBROKE PINES FL 33027	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV JANU, RUDOLPH P 701 SW 128 AVENUE F-104 PEMBROKE PINES FL 33027	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DST FERRETTI, NANCY 701 SW 128 AV F-115 Pembroke Pines, FL 33027 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DST HEYMAN, RUTH 901 SW 128 AVE E- 306 PEMBROKE PINES FL 33027	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP D RUTH HEYMAN 901 SW 128 AV E-306 Pembroke Pines, FL 33027 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E037 (10/02)

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 1-13-03 954 436-5888
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #