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

## **DOCUMENT # N18613**

1. Entity Name

## SPRINGVIEW CONDOMINIUM ASSOCIATION, INC.



**FILED** May 12, 2003 8:00 am Secretary of State 05-12-2003 90193 018 \*\*\*\*61.25

					1	WE TRUS					
Principal Place of Business 121 MORNINGSIDE DRIVE #1			Mailing Address 121 MORNINGSIDE DRIVE #3								
MIAMI SPRINGS FL 33166-5298 US			MIAMI SPRINGS FL 33166-5298				† ( <b>80</b> )(§1) <b>8</b> 0) ()(	181 (1911 <b>) 2</b> 018) (1 <b>930</b> (101 212) 201	eri eribir biblir bil	PRI <b>ene</b> ra d <b>e e</b> n	
2. Principal Place of Business			3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City & State			City & State			<del></del>	4. FEI Number 65	5-0033465	Applied For Not Applicable		}
Zip: Country.			Zip Cou				5. Certificate of St	atus Desired 🗝 🗌	\$8.75 Additional Fee Required		
6. Name and Address of Current F			egistered Agent			7. Name and Address of New Registered Agent					
					Name				<u> </u>		1
Bradley, dan 121 Morningside dr., #3						Street Address (P.O. Box Number is Not Acceptable)					
MIAMI SF	PRINGS FL 33166				City				Zip Coo	le	
	<u>-</u>							FL	•   '' ''		
	named entity submits this statement for ions of registered agent.	or the purp	oose of changing its	registere	ed office o	or register	red agent, or both, in	the State of Florida. I am	familiar with,	and accept	
SIGNATURE .	Signature, typed or printed name of registered agent	and title if ap	plicable. (NOTE	: Registere	d Agent signa	iture required	d when reinstating)	S DATE	03	<del></del>	
							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				4
FILE NOW: FEE IS \$61.25			Election Campaign Fi Trust Fund Contribution				\$5.00 May Be Added to Fees  Make Check Payable to Florida Department of State				
10.	OFFICERS AND DI	RECTORS		11.			ADDITIONS/CHANG	ES TO OFFICERS AND DI	RECTORS IN	110	┨
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NAME	ALONSO, ANGEL A		□ Delete	NAM					Onlings		(10/02
STREET ADDRESS	121 MORNINGSIDE DR. #1				- Et address						
CITY-ST-ZIP					r-ST-ZIP						F037
	D					1			☐ Change	☐ Addition	R. H.
TITLE NAME	ALONSO, FLORINA		☐ Delete	TITLE					change	Addition Addition	"
STREET ADDRESS	121 MORNINGSIDE DR.; #1-				: et address						
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	D			-		<u> </u>			Chross	☐ Addition	ł
TITLE .	BRADLEY, PATRICIA M		☐ Delete	TITLE					☐ Change	☐ Addition	
STREET ADDRESS	121 MORNINGSIDE DRIVE, #3				: Et address						
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	MIAMI SITURGO I E 35 166			1		1					
TITLE			☐ Delete	TITLE		ļ			☐ Change	☐ Addition	
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CITY-ST-ZIP				CITY-	·ST-ZIP	<u> </u>					1
12 I hereby o	ertify that the information supplied with	thie filine	does not qualify for	the ever	antion eta	tod in So	sction 110 07/3)(i) Ele	vida Statuton I further co	tifu that the i	oformation	1

indicated on this report or supplied with this hilling 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:

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