

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 05, 2001 8:00 am
Secretary of State

02-05-2001 90092 026 ****61.25

DOCUMENT # N21577

1. Entity Name

APPLEWOOD VILLAGE IV CONDOMINIUM ASSOCIATION, IN

Principal Place of Business

Mailing Address

C/O CASTLE MGMT. INC.
 P O BOX 189013
 PLANTATION FL 33318

C/O CASTLE MGMT. INC.
 P O BOX 189013
 PLANTATION FL 33318

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0035400

Applied For

Not Applicable

Zip

Country

Zip

Country

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

PRESS, ELEANOR
 1280 SW 36 AVE., #301
 POMPANO BCH. FL 33069

Address Correction only

Name

Street Address (P.O. Box Number is Not Acceptable)

2898 Carambola Circle South

City

Coconut Creek

FL

Zip Code
33066

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 reinstalling)

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	D BROOK, LOUIS 1280 SW 36 AVE., #301 POMPANO BCH. FL 33069	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PRESS, ELEANOR 1280 SW 36 AVE #301 POMPANO BCH. FL 33069	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BENNETT, CONSTANCE 2869 CARAMBOLA CIR S. COCONUT CREEK FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SCHOENFELD, JULIE 1280 SW 36 AVE., #301 POMPANO BCH. FL 33069	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD KARMEI, HAROLD 2951 CARAMBIKA CR S, COCONUT CREEK FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ZEBITZ, ETHEL 1280 SW 36 AVE., #301 POMPANO BCH. FL 33069	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<i>2907 Carambola Cr. South Coconut Creek, FL 33066</i>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<i>2898 Carambola Cr. South Coconut Creek, FL 33066</i>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<i>2877 Carambola Cr. South Coconut Creek, FL 33066</i>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<i>2951 Carambola Cr. South Coconut Creek, FL 33066</i>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<i>ZOBITZ 2910 Carambola Cr. South Coconut Creek, FL 33066</i>	

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: *Eleanor Press* RECEIVED BY Press, PResident

1/12/01 (954) 792-6000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)