

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

FILED
Jan 22, 2003 8:00 am
Secretary of State

01-22-2003 90046 023 ****61.25

DOCUMENT # N24061

1. Entity Name

CORPORATE PARK AT EMERALD LAKE ASSOCIATION, INC.



Principal Place of Business

**31111 STIRLING ROAD
FT. LAUDERDALE FL 33312**

Mailing Address

**31111 STIRLING ROAD
FT. LAUDERDALE FL 33312**

20015828



2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0265915**

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**POLIAKOFF, GARY A
3111 STIRLING ROAD
FORT LAUDERDALE FL 33312**

7. Name and Address of New Registered Agent

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

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 Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE **PTD** Delete
NAME **POLIAKOFF, GARY A.**
STREET ADDRESS **3111 STIRLING ROAD**
CITY-ST-ZIP **FT. LAUDERDALE FL 33312**

TITLE **VD** Delete
NAME **PAUL, STANFORD A.**
STREET ADDRESS **3111 STIRLING ROAD**
CITY-ST-ZIP **FT. LAUDERDALE FL 33312**

TITLE **D** Delete
NAME **HOLLANDER, WALTER**
STREET ADDRESS **3109 STIRLING ROAD**
CITY-ST-ZIP **FT. LAUDERDALE FL**

TITLE **D** Delete
NAME **BECKER, ALAN S**
STREET ADDRESS **3111 STIRLING RD.**
CITY-ST-ZIP **FT. LAUDERDALE FL 33312**

TITLE **D** Delete
NAME **BERMAN, STEVEN**
STREET ADDRESS **3990 SHERIDAN STREET, STE 209**
CITY-ST-ZIP **HOLLYWOOD FL**

TITLE **D** Delete
NAME **BATIEVSKY, ABRAHAM**
STREET ADDRESS **3990 SHERIDAN STREET, STE 209**
CITY-ST-ZIP **HOLLYWOOD FL**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
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TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change 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:

SIGNATURE REQUIRED
GARY A. POLIAKOFF
PRESIDENT 1-6-03

CR2E037 (10/02)