2000 UNIFORM BUSINESS REPORT (UBR)

Apr 26, 2000 8:00 am Secretary of State **DOCUMENT # N36459** 1. Entity Name ANDOVER C CONDOMINIUM ASSOCIATION INC. OF WEST P 04-26-2000 90043 028 ****61.25 Principal Place of Business Mailing Address C/O SCHECHTEL, FRANCES 78 ANDOVER C C/O BENJAMIN FRIEDMAN 55 ANDOVER "C" WEST PALM BEACH FL 33417-2652 WEST PALM BEACH FL 33417-2649 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 59-1637925 Not Applicable Country \$8.75 Additional Zip Zip Country 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) SCHECHTEL, FRANCES 55 ANDOVER C WEST PALM BEACH FL 33417-2649 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 ed Agent signature required when reinstating) 9. Election Campaign Financing Make Check Pavable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Addition TITLE Change ☐ Delete TITI F NAME RADONSKY, MONA NAME STREET ADDRESS STREET ADDRESS 53 ANDOVER C CITY-ST-ZIP CITY-ST-ZIP W. PALM BEACH FL 33417-2649 ☐ Change ☐ Addition TITLE TITLE Delete PEDBERESKY, ELEANOR NAME NAME est Palm Beach, Fl. 33417 STREET ADDRESS STREET ADDRESS 71 ANDOVER C CITY-ST-ZIP CITY-ST-7IP WEST PALM BEACH FL 33417 Change ☐ Addition TITLE Delete TITLE eorge Koslowsky NAME SCHERMER, GLADYS NAME Moses over alm, Beach, F.L. 33417 STREET ADDRESS STREET ADDRESS 65 ANDOVER "C" CITY-ST-7IP CITY-ST-ZIP WEST PALM BEACH FL 33417 ☐ Addition Change TITLE 🔀 Delete BLECKER, SUE NAME est Palm Beach, Fl. 33417 STREET ADDRESS 62 ANDOVER "C" STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33417 Change ☐ Addition TITLE 🔀 Delete laine Kahn ERICSON, BOLESLAR NAME NAME 54 Andover "(" West Palm Beach, F.L. 33417 Resigned STREET ADDRESS STREET ADDRESS 68 ANDOVER C CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33417 TITLE Change ☐ Addition TITLE ☐ Delete NAME SCHECHTEL, FRANCES NAME STREET ADDRESS STREET ADDRESS 55 ANDOVER C CITY-ST-ZIP CITY-ST-ZIP W. PALM BEACH FL 33417

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:

Date Davime Phone #