

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

**FILED**  
**Feb 10, 2003 8:00 am**  
**Secretary of State**

1/1

01-14-2003 90078 017 \*\*\*\*61.25

**DOCUMENT # N37789**

1. Entity Name

**GREENBRIER A CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business

**408 GREENBRIER 'A'**  
**WEST PALM BEACH FL 33417-2387**  
**US**

Mailing Address

**402 GREENBRIER 'A'**  
**WEST PALM BEACH FL 33417-2387**  
**US**

**55005798**

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 **59-1561074**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**HENRY, BARBARA**  
**408 GREENBRIER 'A'**  
**WEST PALM BEACH FL 33417**

7. Name and Address of New Registered Agent

Name **Kurt Weiss**  
Street Address (P.O. Box Number is Not Acceptable)  
**402 Greenbrier A**  
**W.P.B., FL**  
City **FL** Zip Code **33417**

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 **KURT WEISS**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**2/6/03**

**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          | <b>P</b>                        | <input type="checkbox"/> Delete |
| NAME           | <b>HENRY, BARBARA</b>           |                                 |
| STREET ADDRESS | <b>408 GREENBRIER 'A'</b>       |                                 |
| CITY-ST-ZIP    | <b>WEST PALM BEACH FL</b>       |                                 |
| TITLE          | <b>VP</b>                       | <input type="checkbox"/> Delete |
| NAME           | <b>HEIT, SAVI</b>               |                                 |
| STREET ADDRESS | <b>301 GREENBRIER, A</b>        |                                 |
| CITY-ST-ZIP    | <b>WEST PALM BEACH FL 33417</b> |                                 |
| TITLE          | <b>DS</b>                       | <input type="checkbox"/> Delete |
| NAME           | <b>MESSINA, CAROL</b>           |                                 |
| STREET ADDRESS | <b>411 GREENBRIER A</b>         |                                 |
| CITY-ST-ZIP    | <b>WEST PALM BEACH FL 33417</b> |                                 |
| TITLE          | <b>D</b>                        | <input type="checkbox"/> Delete |
| NAME           | <b>WEISS, KURT</b>              |                                 |
| STREET ADDRESS | <b>402 GREENBRIER 'A'</b>       |                                 |
| CITY-ST-ZIP    | <b>WEST PALM BEACH FL</b>       |                                 |
| TITLE          | <b>D</b>                        | <input type="checkbox"/> Delete |
| NAME           | <b>GOLDBERG, SADIE</b>          |                                 |
| STREET ADDRESS | <b>102 GREENBRIER, A</b>        |                                 |
| CITY-ST-ZIP    | <b>WEST PALM BEACH FL 33417</b> |                                 |
| TITLE          | <b>D</b>                        | <input type="checkbox"/> Delete |
| NAME           | <b>HENRY, RAY</b>               |                                 |
| STREET ADDRESS | <b>408 GREENBRIER A</b>         |                                 |
| CITY-ST-ZIP    | <b>WEST PALM BEACH FL 33417</b> |                                 |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

|                |                         |                                                                              |
|----------------|-------------------------|------------------------------------------------------------------------------|
| TITLE          | <b>P</b>                | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           | <b>Kurt Weiss</b>       |                                                                              |
| STREET ADDRESS | <b>402 Greenbrier A</b> |                                                                              |
| CITY-ST-ZIP    | <b>W.P.B., FL</b>       |                                                                              |
| TITLE          | <b>VP</b>               | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           | <b>Tibor Lichtman</b>   |                                                                              |
| STREET ADDRESS | <b>309 Greenbrier A</b> |                                                                              |
| CITY-ST-ZIP    | <b>W.P.B., FL</b>       |                                                                              |
| TITLE          | <b>SAME</b>             | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME           | <b>SAME</b>             |                                                                              |
| STREET ADDRESS | <b>SAME</b>             |                                                                              |
| CITY-ST-ZIP    | <b>SAME</b>             |                                                                              |
| TITLE          | <b>Treas</b>            | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           | <b>Helen Kupsick</b>    |                                                                              |
| STREET ADDRESS | <b>413 Greenbrier A</b> |                                                                              |
| CITY-ST-ZIP    | <b>W.P.B., FL</b>       |                                                                              |
| TITLE          | <b>Rosaland Smoller</b> | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           | <b>214 Greenbrier A</b> |                                                                              |
| STREET ADDRESS | <b>W.P.B.</b>           |                                                                              |
| CITY-ST-ZIP    | <b>W.P.B., FL</b>       |                                                                              |
| TITLE          | <b>John Kupsick</b>     | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME           | <b>413 Greenbrier A</b> |                                                                              |
| STREET ADDRESS | <b>W.P.B., FL</b>       |                                                                              |
| CITY-ST-ZIP    | <b>W.P.B., FL</b>       |                                                                              |

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 WEISS**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**1/7/03 040-5872**

CR2E037 (10/02)