

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N43384

1. Entity Name

LAKEVIEW TOWNHOMES AT THE CALIFORNIA CLUB CONDOM

03-26-2001 90010 043 *****61.25

N43384

FILED

01 JUN 28 PM 3:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
% PHOENIX MANAGEMENT 541 S. STATE ROAD 7, #12
MARGATE FL 33068 US

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number 65-0260339 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GOLDBERG, SHELDON
541 S. STATE ROAD 7, #12
MARGATE FL 33068

7. Name and Address of New Registered Agent

Name Phoenix Management Services, Inc.
Street Address (P.O. Box Number is Not Acceptable)
541 S. State Rd 7 Suite 12
City Margate FL Zip Code 33068

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 *Kerry Pughman* 3/19/01
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 ☐ \$5.00 May Be Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BODEK, LORRAINE 20834 SAN SIMEON WAY, #63B NO MIAMI BCH FL 33179 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ALEXANDER, DIANE 20834 SAN SIMEON WAY, #70C NO MIAMI BCH FL 33179 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT HOWERTON, RICHARD 20834 SAN SIMEON WAY, #64C N. MIAMI BCH. FL 33179 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S OSBORNE, JOSEPHINE H 20826 SAN SUMON WAY NO MIAMI BEACH FL 33179 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD TORRES, JUAN J 20834 SANSEAN WAY NO MIAMI BCH FL 33029 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SO/TO Richard Howerton 20834 San Simeon way 64C NMB FL 33179 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASKEL HUUS D 20826 San Simeon way 55C North miami Bch FL 33179 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Martha Schmidt 20820 San Simeon way 28C NMB FL 33179 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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:

Lorraine Bodek
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)