

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
 May 22, 2001 8:00 am
 FILED State
 05-22-2001 90018 011 *****6125
 03-15-2001 90034 010 *****6125
 01 OCT 29 PM 5:06
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA
 708740

DOCUMENT # **N49895**
 1. Entity Name
DEERING BAY CLUB VILLAS ASSOCIATION, INC.

Principal Place of Business Mailing Address
THE CONTINENTAL GROUP, LTD.
12079 SW 131 AVENUE


2. Principal Place of Business 3. Mailing Address
12079 SW 131 AVE **12079 SW 131 AVE**
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
MIAMI, FL **MIAMI, FL**
 Zip Country Zip Country
33186 **USA** **33186** **USA**

4. FEI Number Applied For
650466888 Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
HYMAN & KAPLAN
150 W. FLAGLER ST SUITE #2701
MIAMI, FL 33130

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.
 SIGNATURE  **GILBERT TENDLER** **4/29/01**
Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when re-instating) DATE

FILE NOW: FEE IS \$81.25 9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees **Make Check Payable to: Department of State**

0. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TENDLER, GILBERT 13620 DEERING BAY DRIVE MIAMI, FL 33158 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD SAGE, RICHARD 13636 DEERING BAY DRIVE MIAMI, FL 33158 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CERVANTES, PATRICIO 13632 DEERING BAY DRIVE MIAMI, FL 33158 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MILLHEISER, PETER 13640 DEERING BAY DRIVE MIAMI, FL 33158 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GOLDBERG, HARRIS 13652 DEERING BAY DRIVE MIAMI, FL 33158 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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: **Gilbert Tendler GILBERT TENDLER** **4/29/01**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (11/00)