2002 UNIFORM BUSINESS REPORT (UBR)

200	2 UNII	ORM I	BUSINES	SS REPO)ŘŤ (UB	R)		Iar 12	FILED 2, 2002		
DOCUMENT # N96000004353) 		tary of		
MEDITE	rrania ho	OMEOWNER	s associatio	ON, INC.)			31 21 2	2 3 0 0 0 0 0 10	311 2 0	
Principal Place of Business Mailing Address												
7122 VIA FIRENZE BOCA RATON FL 33433				7122 VIA FIRENZE BOCA RATON FL 33433				17355				
Principal Place of Business 3. M.				. Mailing Address								
Suite, Apt. #, etc.				Suite, Apt. #, etc.					DO NOT WRI	TE IN THIS SPACE		
City & Sta	ty & State). State				4. FEI Number 65-074 1590 Applied For Not Applicable						
Ζiρ΄	Zip Country			o	Coun	try		'5 Certificate of Status Desired \$8.75 Additional Fee Required				
	and Address of	d Agent				7. Name and Add	tress of New F			1		
	-	v				Name	05	EPHO	PRTLI	EB _		
gorre, out at							Address (P.O. Box Number is	Not Acceptable	セルユヒ		
र्वि i38 VA FIRÊNZÊ औBOÇA RATON FL 33433						BNO	°.A	RATOR	1]
N DOOR IN	~.				City		7011	-	FL Z5°	3433	1	
8. The above	named entity	submits this sta	tement for the purp	ose of changing ltd	s registered	office o	r register	ed agent, or both, in	the state of Flo	orida.		
SIGNATURE TOSEPH ORTLIEB Signature byed or printed name of regulatered agent and title if applicable. (NOTE: Reprinted Agent admitture reci								Otto	Ý	1.14.02		
	Signature, typed o	purec name or requ	нагас адопсыка ша и ирд	meadle. (NO	7	- Jan Signa	this isdailed	where remissioning)	 -			-
FILE NOW: FEE IS \$61.25 9. Election Can Trust Fund C								\$5.00 May Be Added to Fees		ke Check Payabl Pepartment of Sta		
10.		OFFICERS	AND DIRECTORS		11.		A	DDITIONS/CHANG	ES TO OFFICE	RS AND DIRECTORS	IN 10	1
TITLE NAME	P HOPPE, GA	DV		Delete	TITLE					Change	Addition	2E037 (9/01)
STREET ADDRESS	7138 VIA FI			•		ADDRESS	ł					37 (
CITY-ST-ZIP		ON FL 33433			CITY-S			· · · · · · · · · · · · · · · · · · ·	1-1	CURE	R	
TITLE NAME	S Kolb, Cha	DOI ETTE		Detete	TITLE NAME		SEC	RETAR	4 / 7 K	Change Change	Addition	٥
STREET ADDRESS	7122 VIA FI					ADDRESS	1		•	•		ĺ
City-St-Zip	BOCA RATO	ON FL 33433			. CITY-S	T-ZIP	177.6	7-5-7-0			· ·	}
TITLE 	HERMON, D	ANNY		Delete	TITLE NAME			ECTOR	ب ليديدان دانسته وسندود	Change	Addition	
STREET ADDRESS	7120 VIA M	ARBELLA			STREET	address)
CITY-ST-ZIP	BOCA RATO	ON FL 33433			CITY-SI	I - ZIP	001	3510 EN			<u> </u>	
TITLE NAME	ORTLIEB, JO	OSEPH		☐ Ozieta	NAME		PRO	210010	•	Change	Addition	
STREET ADDRESS	7130 VIA FI	RENZE			STREET	ADDRESS						
CITY-ST-ZIP		ON FL 33433		- t	CITY-SI	T-ZIP						
TITLE NAME) d Menendez.	BENNY		Delete	TITLE NAME					Change	Addition	
STREET ADDRESS	7169 VIA FI	RENZE			STREET	ADDRESS)
CITY-ST-ZIP	BOCARARO	N FL 33433			CITY-ST	- ZIP						
TITLE NAME				Delete	TITLE NAME					☐ Change	Addition	
STREET ADDRESS					STREET	address	•					
CITY-ST-ZIP	ordin that the	information and	Bod with the 401-	dana ant aurallé d	CITY-ST				-14- 00	6. ab		i
indicated of the cor	certify that the light on this report of the	or supplemental or supplemental receiver or true	report is true and a tee empowered to	uces not quality for accurate and that n accuse this renor	ny signature ny signature	e shall h by Cha	ed in Sec ave the sa inter 617	non 1 19.07(3)(1), Flo ame legal effect as it Florida Statutes: 200	rida Statutes. I made under o dibat my name	further certify that the ath; that I am an office appears in Block 10 i	information or director or Block 11 if	1
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 eath; 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 office like empowered.												
CICNAT		Water	(ATTILITY AT	TIKOLUI	is en	γH	.()c	Hieb I.	4.02	954-427-	7513	