

2002

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # N 96000004504
1. Entity Name
Normandy Palms Condominium Association, INC.

SEP -3 PM 4:01

DO NOT WRITE IN THIS SPACE

000007628640--0
-09/10/02--01032--008
****245.00 ****245.00

2. Principal Place of Business 6941 BAY DRIVE Suite, Apt. #, etc. A-3 City & State MIAMI BEACH, FLA Zip 33141 Country USA		3. Mailing Address % ASSOCIATION Mgmt. Group Suite, Apt. #, etc. P.O. Box 630280 City & State MIAMI, FL. Zip 33163-0280 Country USA	
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4. FEI Number 65-0696474	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

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7. Name and Address of Current Registered Agent

Name
MARSHALL KAPMEN
Street Address (P.O. Box Number is Not Acceptable)
500 WEST CYPRESS CREEK ROAD
SUITE 230
City
FT. LAUDERDALE
FL
Zip Code
33309

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 *Marshall Kapmen*

7/30/02
DATE

(NOTE: Registered Agent signature required when reinstating)

FEE IS \$61.25
Initial or Amended UBR

9. Election Campaign Financing
Trust Fund Contribution. \$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	P/D-STEVE RAMSEY 6941 BAY DRIVE - #C3 MIAMI BEACH, FL 33141
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S/T/D-MARYLYN SHAIKH 6941 BAY DRIVE - C6 MIAMI BEACH, FL 33141
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D - BLAKE FISHER 6941 BAY DRIVE - A3 MIAMI BEACH, FL 33141
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CR2E037B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: *Marylyn Shaikh* MARYLYN SHAIKH Sec/Treas

7/30/02 (305) 792-0055
DATE Daytime Phone #

1/6/02