2003 NOT-FOR-PROFIT CORPORATION

UNIFORM	BUSINESS	REPORT	(U	BF
DOCUMENT #	N0700004	COC		

Principal Place of Business

City & State

C T CORPORATION SYSTEM

PLANTATION FL 33324

1200 SOUTH PINE ISLAND ROAD

Zip

N9/UUUUU46U6 1. Entity Name

THE S	YOVA	ON	SOUTH	BEACH	CONDOMINIUM	ASSOCIATION
, INC.						



C/O THE ARDEN GROUP 455 OCEAN DR MIAMI BEACH FL 33139 121 S. BROAD ST., 13TH FLOOR PHILADELPHIA PA 19107 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc.

Mailing Address

City & State

Zip

FIFD

03 APR 28 PM 12: 55

SECRETARY OF STATE TALLAHASSEE, FLORIDA



CHECK HERE IF MAKING CHANGES

4. FEI Number 65-0778032 Applied For Not Applicable

\$8.75 Additional

6. Name and Address of Current Registered Agent

Country

Country

7. Name and Address of New Registered Agent

Street Address (P.O. Box Number is Not Acceptable)

5. Certificate of Status Desired

City

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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 Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10.	OFFICERS AND DIRECTORS		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SPENCER, CRAIG 121 S. BROAD ST., 13TH FLOOR PHILADELPHIA PA 19107	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	800 05/07/03	0184634 01090020	□ Change + □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PIETROPOLI, RICHARD 121 S. BROAD ST., 13TH FLOOR PHILADELPHIA PA 19107	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD CARUSO, JOSEPH S 121 S. BROAD ST., 13TH FLOOR PHILADELPHIA PA 19107	` □ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		••	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS			☐ Change	☐ 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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

3/20/03

CR2E037 (10/02)