

6/11

FILED
Jul 04, 2002 8:00 am
Secretary of State

06-11-2002 90392 014 ****61.25

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000004892

1. Entity Name

SPRING VALLEY PHASE III HOMEOWNERS' ASSOCIATION,
 INC.

Principal Place of Business

CONTINENTAL GROUP
 1321 SW 107TH AVE, STE 210-A
 MIAMI FL 33174

Mailing Address

1067 SHOTGUN RD
 SUNBICE FL 33028

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

The Continental Group, Ltd.
 2950 North 28th Terrace
 Hollywood, Florida 33020

Zip

Country

4. FEI Number 65-0783184

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

MACIVER, STUART J P.A.
 1177 SE 3RD AVE
 FORT LAUDERDALE FL 33316

Name

David Brough

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

2240 S.W. 70th Ave.

Suite D

City Davie

FL

Zip Code

33324

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

4/27/02

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SIREGARCIA, MELISSA 8550 NW 33RD ST MIAMI FL 33175	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD MARTIN, TANIA M 1321 SW 107TH AVE MIAMI FL 33174	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSTD ALLEGUE, MARIA LOURDES 8550 NW 33RD ST MIAMI FL 33174	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President ☒ Change ☐ Addition Richard Falcon 16315 N.W. 12th Street Pembroke Pines FL 33028
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ☒ Change ☐ Addition Michael Arnett 16461 N.W. 12th Street Pembroke Pines, FL 33028
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sec. ☒ Change ☐ Addition Gaylen Hayes 16447 N.W. 12th Street Pembroke Pines, FL 33028
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer ☒ Change ☐ Addition Steve Green 16474 N.W. 12th Street Pembroke Pines, FL 33028
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director ☐ Change ☐ Addition Shawn Halliach 16439 N.W. 16th Street Pembroke Pines, FL 33028
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:

GAYLEN HAYES
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/24/02 954-325-0714

CR25037 (9/01)