## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# N99000004689

Entity Name: THE FOUNTAINS I CONDOMINIUM ASSOCIATION, INC.

Sep 13, 2002 Secretary of State

**New Principal Place of Business: Current Principal Place of Business:** 

15645 S.W. 74TH CIRCLE DRIVE MIAMI, FL 33193

**Current Mailing Address: New Mailing Address:** 

15645 S.W. 74TH CIRCLE DRIVE 7154-B SOUTH WEST 47TH STREET

MIAMI, FL 33193 MIAMI, FL 33155 US

FEI Number: 65-1049773 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KRAMER, ROBERT CADICORP MANAGEMENT GROUP 450 SW 88TH TERR 7154-B SOUTH WEST 47TH STREET

PEMBROKE PINES, FL 33025 US MIAMI, FL 33155 US

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: CADICORP MANAGEMENT GROUP 09/13/2002

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete KRAMER, ROBERT B ALBERTO, LOPEZ Name: Name: 450 S.W. 88TH TERRACE Address: 15615 SW 74 CIRCLE DRIVE Address:

PEMBROKE PINES, FL 33025 MIAMI, FL 33193

City-St-Zip: City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition BERGER, ARNOLD B Name: Name: MISHELLE, RUIZ

Address: 450 S.W. 88TH TERRACE Address: 15615 SW 74 CIRCLE DRIVE

City-St-Zip: PEMBROKE PINES, FL 33025 City-St-Zip: MIAMI, FL 33193

Title: () Delete Title: SD (X) Change ( ) Addition SINCLAR, OMAIRA Name: IVY, BARRATZ Name:

15655 SW 74TH CR DR #08 15655 SW 74 CIRCLE DRIVE Address: Address:

City-St-Zip: MIAMI, FL 33193 City-St-Zip: MIAMI, FL 33193

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALBERTO RUIZ PD 09/13/2002

Electronic Signature of Signing Officer or Director

Date