

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N26648

1. Entity Name

CLAIRMONT CONDOMINIUM F ASSOCIATION, INC.

**FILED**  
**Feb 02, 2000 8:00 am**  
**Secretary of State**

02-02-2000 90019 046 \*\*\*\*61.25

Principal Place of Business

Mailing Address

GOLDMAN & JUDA-SUITE 201  
7771 W. OAKLAND PARK BLVD.  
FT. LAUDERDALE FL 33351

GOLDMAN & JUDA-SUITE 201  
7771 W. OAKLAND PARK BLVD.  
FT. LAUDERDALE FL 33351-6749

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0051904

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FRIEDMAN, MAX  
10620 W CLAIRMONT CIR  
TAMARAC FL 33321

Name

MARVIN BROMBERG

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

10624 W. CLAIRMONT Circle

City

TAMARAC

FL

Zip Code

33321

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 MARVIN BROMBERG

Marvin Bromberg

1/29/00

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  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Delete  
NAME P  
STREET ADDRESS FRIEDMAN, MAX  
CITY-ST-ZIP 10620 CLAIRMONT CIR  
TAMARAC FL 33321

TITLE ☒ Change ☐ Addition  
NAME P./MARVIN BROMBERG  
STREET ADDRESS 10624 W. CLAIRMONT Circle  
CITY-ST-ZIP TAMARAC, FL 33321

TITLE ☒ Delete  
NAME D  
STREET ADDRESS FERTMAN, ZELDA  
CITY-ST-ZIP 10672 CLAIRMONT CIR  
TAMARAC FL 33321

TITLE ☒ Change ☐ Addition  
NAME D./SHLEVIN, DAVID  
STREET ADDRESS 10604 W. CLAIRMONT Circle  
CITY-ST-ZIP TAMARAC, FL 33321

TITLE ☒ Delete  
NAME TD  
STREET ADDRESS SAPORTA, JUDITH  
CITY-ST-ZIP 10668 W CLAIRMONT CIRCLE  
TAMARAC FL

TITLE ☒ Change ☐ Addition  
NAME TD/D/FLORA, NICHOLAS J.  
STREET ADDRESS 10640 W. CLAIRMONT Circle  
CITY-ST-ZIP TAMARAC, FL 33321

TITLE ☐ Delete  
NAME SD  
STREET ADDRESS BERSTEIN, HYMAN  
CITY-ST-ZIP 10666 W. CLAIRMONT CIR  
TAMARAC FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Delete  
NAME D  
STREET ADDRESS BOXER, CALVIN  
CITY-ST-ZIP 10660 W CLAIRMONT CIR  
TAMARAC FL 33321

TITLE ☒ Change ☐ Addition  
NAME D/ FISCHER, EMERY  
STREET ADDRESS 10624 W. CLAIRMONT Circle  
CITY-ST-ZIP TAMARAC, FL 33321

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

MARVIN BROMBERG

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/29/00

Date Daytime Phone #

CR2E037 (9/99)