2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 765043

1. Entity Name

BIRDGROVE TOWNHOUSES CONDOMINIUM, INC.

FILED
Feb 20, 2000 8:00 am
Secretary of State
02-20-2000 90013 014 ****61.25

Principal Place of Business	Mailing Address
% CAPITAL DEVELOPMENT AND INVESTMENT CORP. 2150 CORAL WAY. SIXTH FLOOR MIAMI FL 33145	% CAPITAL DEVELOPMENT AND INVESTMENT CORP. 2150 CORAL WAY. SIXTH FLOOR MIAMI FL 33145-2629

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0504654 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SMITH, GARY V ESQ.
1230 NW 7TH STREET
MIAMI FL 33125

7. Name and Address of New Registered Agent

Name

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

City **FL** 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.

SIGNATURE _____ DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BARROSO, ED C/O 2150 CORAL WAY 6TH FL MIAMI FL 33145	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT LOVIO, HECTOR % 2150 CORAL WAY, 6TH FLOOR MIAMI FL 33145	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD ~~DUARTE, PETER~~ % 2150 CORAL WAY, 6TH FLOOR MIAMI FL 33145	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S/D SUSAN GERRISH	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD SIDES, REBECCA 2150 CORAL WAY 6TH FL MIAMI FL 33145	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ~~BROWN, SCOTT~~ 2150 CORAL WAY 6TH FL MIAMI FL 33145	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LOURDES LUACES	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/99)

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: [illegible] REQUIRED 2/28/00 305-858-5620

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #