

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N49544

1. Entity Name

DEVON CONDOMINIUM G ASSOCIATION, INC.

FILED
Feb 15, 2000 8:00 am
Secretary of State

02-15-2000 90037 005 ****61.25

Principal Place of Business

Mailing Address

C/O CASTLE GROUP
PO BOX 189013
PLANTATION FL 33318
US

C/O CASTLE GROUP
PO BOX 189013
PLANTATION FL 33318-9013
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0351433

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

~~CASTLE PROPERTY SVCS GROUP, INC.~~
4450 W SUNRISE BLVD
STE 100
PLANTATION FL 33313

Name Castle Management, Inc.

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

Gail H. Sangunett

Gail H. Sangunett, Vice President

1/27/00

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 PD ☐ Delete
NAME HATTMAN, CHARLEY
STREET ADDRESS 7456 N DEVON DR
CITY-ST-ZIP TAMARAC FL

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

TITLE VPD ☒ Delete
NAME COHEN, LESTER
STREET ADDRESS 7450 N DEVON DR
CITY-ST-ZIP TAMARAC FL

TITLE VD ☐ Change ☒ Addition
NAME Clifford, Lillian
STREET ADDRESS 7414 N. Devon Drive
CITY-ST-ZIP Tamarac, FL

TITLE TD ☒ Delete
NAME DITMAN, JULIUS
STREET ADDRESS 7394 N DEVON DR
CITY-ST-ZIP TAMARAC FL

TITLE VD ☐ Change ☒ Addition
NAME Kalstein, Calvin
STREET ADDRESS 7404 N. Devon Drive
CITY-ST-ZIP Tamarac, FL

TITLE D ☒ Delete
NAME HOLLAND, ABNER
STREET ADDRESS 7402 N DEVON DR
CITY-ST-ZIP TAMARAC FL

TITLE SD ☐ Change ☒ Addition
NAME Magazine, Irene
STREET ADDRESS 7454 N. Devon Drive
CITY-ST-ZIP Tamarac, FL

TITLE SD ☒ Delete
NAME KRAUSE, SYLVIA
STREET ADDRESS 7410 N DEVON DR
CITY-ST-ZIP TAMARAC FL

TITLE TD ☐ Change ☒ Addition
NAME Kaplan, Roberta
STREET ADDRESS 7444 N. Devon Drive
CITY-ST-ZIP Tamarac, FL

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:

Charley Hattman

Charley Hattman, President 1/27/00 (954) 792-6000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)