

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 729332

1. Entity Name

STRATFORD ARMS CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Apr 03, 2000 8:00 am**  
**Secretary of State**

04-03-2000 90154 040 \*\*\*\*61.25

Principal Place of Business

Mailing Address

2600 SOUTH OCEAN BLVD  
BOCA RATON FL 33432

2600 SOUTH OCEAN BLVD  
BOCA RATON FL 33432-8385

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

59-1627939

Applied For

Not Applicable

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

OUZIEL, BERNARD  
STRATFORD ARMS CONDOMINIUM  
2600 S. OCEAN BLVD -PHB  
BOCA RATON FL 33432

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

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 OUZIEL, BERNARD  
STREET ADDRESS 2600 S OCEAN BLVD -PHB  
CITY-ST-ZIP BOCA RATON FL

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

TITLE VPD ☐ Delete  
NAME DWORKIN, DORIS  
STREET ADDRESS 2600 S OCEAN BLVD 12-F  
CITY-ST-ZIP BOCA RATON FL

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

TITLE TD ☐ Delete  
NAME SOLINGER, MATTHEW  
STREET ADDRESS 2600 S OCEAN BLVD 4F  
CITY-ST-ZIP BOCA RATON FL

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

TITLE D ☐ Delete  
NAME MCILRATH, JAMES  
STREET ADDRESS 2600 S OCEAN BLVD 8F  
CITY-ST-ZIP BOCA RATON FL

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

TITLE S ☒ Delete  
NAME NEHMER, STANLEY  
STREET ADDRESS 2600 S OCEAN BLVD 16F  
CITY-ST-ZIP BOCA RATON FL

TITLE SD ☐ Change ☒ Addition  
NAME EDWARD HARVEY  
STREET ADDRESS 2600 S OCEAN BLVD 2E  
CITY-ST-ZIP BOCA RATON, FL 33432

TITLE D ☐ Delete  
NAME MEYERSON, GEORGE  
STREET ADDRESS 2600 S OCEAN BLVD, 6F  
CITY-ST-ZIP BOCA RATON FL 33432

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)