2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 18, 2000 8:00 am Secretary of State **DOCUMENT # 724377** 1. Entity Name LANDS OF THE PRESIDENT CONDOMIMIUM THREE, INC. T 05-18-2000 90379 020 ****61.25 Principal Place of Business Mailing Address D/B/A LINCOLN TOWER D/B/A LINCOLN TOWER 2400 PRESIDENTIAL WAY 2400 PRESIDENTIAL WAY WEST PALM BEACH FL 33401 WEST PALM BEACH FL 33401-1327 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 59-1444740 Not Applicable Country \$8.75 Additional Zip Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) ESPO, ADELE G. 2400 PRESIDENTIAL WAY **UNIT 401** Zip Code City WEST PALM BEACH FL 33401 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 - 地區區(國際語) 542 17 217 C SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: Trust Fund Contribution. Added to Fees **Department of State FEE IS \$61.25** OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. TITI F Change ☐ Addition TITLE PD ☐ Delete NAME ESPO, ADELE G NAME STREET ADDRESS STREET ADDRESS 2400 PRESIDENTIAL WAY #401 CITY-ST-ZIP CITY-ST-ZIP <u>W PALM BCH FL</u> XX Change ☐ Addition Delete TITLE TITLE VD . . DIRECTOR NAME NAME GOLIN, ALBERT STREET ADDRESS STREET ADDRESS 2400 PRESIDENTIAL WAY #1004 CITY-ST-ZIP CITY-ST-ZIP West Palm Beach Fl Change ☐ Addition ☐ Delete TITLE TITLE SD NAME NAME LEWIN, STANLEY STREET ADDRESS STREET ADDRESS 2400 PRESIDENTIAL WAY #2006 CITY-ST-ZIP CITY-ST-ZIP W PALM BCH FL VICE PRESIDENT XX Change Addition Delete TITLE TITLE TD NAME NAME FINESTONE, ARNOLD STREET ADDRESS STREET ADDRESS 2400 PRESIDENTIAL WAY #604 CITY-ST-ZIP CITY-ST-ZIP W PLM BCH FL TITLE □ Change ☐ Addition ☐ Delete TITLE NAME NAME SCHWARTZ, SEYMOUR STREET ADDRESS STREET ADDRESS 2400 PRESIDENTIAL WAY, #1704 CITY-ST-ZIP CITY-ST-ZIP W PALM BCH FL TREASURER ☐ Change XXAddition X Delete TITLE TITLE NAME NAME MANNY MARK ZARIN, FAY C. STREET ADDRESS STREET ADDRESS 2400 PRESIDENTIAL WAY #804 2400 PRESIDENTIAL WAY # 504 CITY-ST-ZIP CITY-ST-ZIP W PALM BCH FL WEST PALM BEACH FLORIDA 33401 12. Thereby certify that the information supplied with this filling 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 treatee 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.

FINESTONE, VICE PRESIDENT

Daytime Phone #

FILED