

2000 UNIFORM BUSINESS REPORT (UBR)

5/

FILED
Jul 12, 2000 8:00 am
Secretary of State

05-26-2000 90066 041 ****61.25

DOCUMENT # 722089

1. Entity Name

VAN BUREN GARDENS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

2127 VAN BUREN GARDENS
HOLLYWOOD FL 33020

Mailing Address

2127 VAN BUREN GARDENS
HOLLYWOOD FL 33020-4996

2. Principal Place of Business

2127 Van Buren ST
Suite, Apt. #, etc.
#206

3. Mailing Address

Same
Suite, Apt. #, etc.

City & State

HOLLYWOOD FL

City & State

Same

4. FEI Number

65-0939617

Applied For

Not Applicable

Zip

33020

Country

USA

Zip

Same

Country

Same

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BOUSSARD, JOHN E
3609 S.W. 21ST CT
FT LAUDERDALE FL 33312

7. Name and Address of New Registered Agent

Name
Carolyn Roberts
Street Address (P.O. Box Number is Not Acceptable)
2127 Van Buren ST #206
HOLLYWOOD FL
City HOLLYWOOD FL Zip Code 33020

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 *Carolyn Y. Roberts* - CAROLYN Y. ROBERTS - PRESIDENT - 4/28/00
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

TITLE	PD	☐ Delete
NAME	BOUSSARD, JOHN E JR	
STREET ADDRESS	3609 S.W. 21ST CT	
CITY-ST-ZIP	FT LAUDERDALE FL 33312	
TITLE	VT	☐ Delete
NAME	RABITISH, GUNTHER	
STREET ADDRESS	5555 N. OCEAN BLVD., #43	
CITY-ST-ZIP	FT LAUDERDALE FL	
TITLE	ST	☐ Delete
NAME	PUNZINNG, ADRIAN	
STREET ADDRESS	2219 POLK ST	
CITY-ST-ZIP	HOLLYWOOD FL	
TITLE	M	☐ Delete
NAME	KANEFESKY, RON	
STREET ADDRESS	2127 VAN BUREN GD., APT 201	
CITY-ST-ZIP	HOLLYWOOD FL 33020	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PRESIDENT - "D"	☒ Change ☐ Addition
NAME	Carolyn Roberts	
STREET ADDRESS	2127 Van Buren ST.	
CITY-ST-ZIP	HOLLYWOOD FL 33020	
TITLE	Treasurer - "T"	☒ Change ☐ Addition
NAME	Patricia Kanefsky	
STREET ADDRESS	12755 SW 16th CT #B103	
CITY-ST-ZIP	HOLLYWOOD FL 33027	
TITLE		☒ Change ☐ Addition
NAME	delete	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☒ Change ☐ Addition
NAME	delete	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	John "VICE PRES" - "T"	☒ Change ☐ Addition
NAME	John Broussard	
STREET ADDRESS	3609 S.W. 21 CT.	
CITY-ST-ZIP	FT. LAUD., FLA 33312	
TITLE	Sharon "SECRETARY" - "D"	☐ Change ☒ Addition
NAME	Sharon Prigmore	
STREET ADDRESS	3850 Washington ST. # 1116	
CITY-ST-ZIP	HOLLYWOOD, FLA 33021	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: *Carolyn Y. Roberts* - CAROLYN Y. ROBERTS 4/28/00 954-925-2402
Signature and typed or printed name of signing officer or director (PRESIDENT) Date Daytime Phone #

CR2E037 (9/99)