

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 721249

1. Entity Name

RAPALLO CONDOMINIUM APARTMENTS ASSOCIATION, INC.

Principal Place of Business

1701 SOUTH FLAGLER DR.
W PALM BCH FL 33401

Mailing Address

1701 SOUTH FLAGLER DR.
W PALM BCH FL 33401

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-1440219

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

Name

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

City

FL

Zip Code

DICKER, EDWARD
ST. JOHN, DICKER, CAPLAN, KRIVOK, ET.AL.
500 AUSTRALIAN AVENUE SOUTH, SUITE 600
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.

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

After September 13, 2000 min. will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution.

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\$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 P
NAME BOUGAR, ERIKA
STREET ADDRESS 1701 S FLAGLER DR
CITY-ST-ZIP WEST PALM BEACH FL 33401

☐ Delete

TITLE T
NAME COOKE, THEODORE
STREET ADDRESS 1701 S FLAGLER DR
CITY-ST-ZIP WEST PALM BEACH FL 33401

☐ Delete

TITLE D
NAME KALNITSKY, EUGENE
STREET ADDRESS 1701 S FLAGLER DR
CITY-ST-ZIP WEST PALM BEACH FL 33401

☐ Delete

TITLE VP
NAME KNOX, RUTH
STREET ADDRESS 1701 S FLAGLER DR
CITY-ST-ZIP WEST PALM BEACH FL

☒ Delete

TITLE S
NAME LIEBERT, JACKIE
STREET ADDRESS 1701 S FLAGLER DR
CITY-ST-ZIP WEST PALM BEACH FL 33401

☐ Delete

TITLE D
NAME BECK, ROBERT
STREET ADDRESS 1701 S FLAGLER DR
CITY-ST-ZIP WEST PALM BEACH FL

☐ Delete

TITLE P
NAME Bougar, Erika
STREET ADDRESS 1701 S. Flagler Dr
CITY-ST-ZIP West Palm Beach, FL 33401

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE VP
NAME Obst, Emily
STREET ADDRESS 1701 S. Flagler Dr
CITY-ST-ZIP West Palm Beach, FL 33401

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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:

Erica Bougar
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ERICA BOUGAR 7/12/00
Date

Daytime Phone #



DO NOT WRITE IN THIS SPACE

CR2E037 (5/00)