2000 UNIFORM BUSINESS REPORT (UBR)

CHILLES STAVMP

SIGNATURE AND TYPED OR PRINTED NAME

$\mathbf{FH}.\mathbf{FD}$ DOCUMENT # **746451** Jul 28, 2000 8:00 am 1. Entity Name **Secretary of State** SOUTH LAKE VILLAS CONDOMINIUM ASSOCIATION, INC. 01-21-2000 90061 030 ****61.25 Principal Place of Business Mailing Address 9130 A. DADELAND BLVD., STE. 1705 9130 A. DADELAND BLVD.: STE. 1705 MAM FL 89156 OCT MANAGENENT, INC 8367 W. FLAGLER ST. MIAMI, FL 33144 MAMI FL 33156-7812 TAADA PNB \$ 352 2. Principal Place of Business Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1985832 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent NAME MAKIN A. CANETO Street Address (P.O. Box Number is Not Acceptable) KANZIGER, ROBERT A ESQ. - 9130- 9: DADELAND BLVD., STE.- 1705 8511 NN 8 STREET # 111 MIAMI FL 33158 MIANI 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 (NOTE: Registered Agent signature required when reinstating) FILE NCW: 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. FEE IS \$61.25 Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITI F PD Delete TITLE 🚨 Change Addition CHANCES STAUMP 8435 3W 156 CT # 1020 NAME SUMMERS, SHARON NAME STREET ADDRESS 8475 S.W. 156 CT. STREET ADDRESS MIANI, FL 33193 CITY-ST-ZIP <u>Miami Fl, 3319</u>3 CITY-ST-ZIP Delete TITLE Addition Change JOHN BETANCOURT NAME KATZ, RICHARD 6 NAME 15685 SW 84 TERR. # 803 STREET ADDRESS 8435 S.W. 158 CT. STREET ADDRESS CITY-ST-ZIP MIANI FL MIAMI FL 33193 CITY-ST-ZIP TITLE SD Delete TITLE □ Change Addition Addition NAME STURM, ERICH NAME Meny L. CASTRO STREET ADDRESS 8465 SW 156 PL. \$ 507 8470 SW 158 CT #203 STREET ADDRESS CITY-ST-ZIP <u>MIAMI FL 33193</u> CITY-ST-7IP MIAMI, FU 33193 TITLE **∑** Delete TITLE Change ■ Addition JUDY MANNES TELL \$ 902 NAME HAMILTON, BARBARA > NAME STREET ADDRESS 15875 SW 84 TERR #920 STREET ADDRESS CITY-ST-ZIP <u>MIAMI FL 33193</u> CITY-ST-ZIP 33193 MIAMI, FL TITLE Addition Delete TITLE ☐ Change NAME MANNES, JUDY DANIA VURADO NAME STREET ADDRESS 15675 SW 84 TERR #902 8,470 5W 156 Cr. \$ 204 STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33193** MIAMI, FL 33193 CITY-ST-ZIP TITLE ☐ Delete TITLE Addition FRANCISCO GOMEN NAME NAME 8470 SW 156 C- \$205 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIANI, FL 33193 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 ampowered.

OFFICER OR DIRECTOR

PREGIDENT