

**2001 UNIFORM BUSINESS REPORT (UBR)****FILED****Feb 26, 2001 8:00 am**  
**Secretary of State**

02-26-2001 90523 015 \*\*\*\*61.25

**DOCUMENT # 754393**

1. Entity Name

**THE 2100 CONDOMINIUM ASSOCIATION, INC.**

Principal Place of Business

**2100 S. OCEAN BLVD.  
PALM BEACH FL 33480**

Mailing Address

**2100 S. OCEAN BLVD.  
PALM BEACH FL 33480****814736**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

4. FEI Number

**59-2027931**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**KORNFELD, GARY  
SUITE 1000  
1400 CENTREPARK BLVD.  
W PALM BCH FL 33401**

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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP**D  
GREENBERG, GEORGE  
2100 S. OCEAN BLVD.  
PALM BEACH FL**☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP**S  
SHERWOOD, RUTH  
2100 S. OCEAN BLVD.  
PALM BEACH FL**☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP**P  
MANNING, MERVYN  
2100 S. OCEAN BLVD.  
PALM BEACH FL 33480**☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP**VP  
HABER, THEODORE  
2100 S. OCEAN BLVD.  
PALM BEACH FL**☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP**D  
ISAACSON, BERNARD  
2100 S. OCEAN BLVD.  
PALM BEACH FL**☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP**T  
ALPERIN, MELVIN  
2100 S. OCEAN BLVD.  
PALM BEACH FL**☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP**DIRECTOR  
WILLIAM LANGFAN  
2100 S. Ocean BLVD.  
PALM Beach, FL**☐ Change☒ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ Change☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ Change☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ Change☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ Change☐ AdditionTITLE  
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: \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

**2/16/01****(561) 582-4285**

Daytime Phone #

CR2E037 (10/00)