2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N9300001734

2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # N9300001734 REGENCY HALL CONDOMINIUM APARTMENTS, INC.					FILED Apr 30, 2001 8:00 am Secretary of State 04-30-2001 90059 026 ****61.25			
Principal Place of Business		Mailing Address						
BAY HARBOR ISLAND FL 33154 US		BAY HARBOR ISLAND FL 33154 US				************	M B(B) (BB)	
2. Principal P	lace of Business	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & State		City & State		4. FEI Numbe	59-1280525		plied For t Applicable	
Zip	Country	Zip	Country	5. Certificate	of Status Desired	\$8.75 Add	itional	
. ,	6. Name and Address of Current Re	egistered Agent	Nessa	7. Name and	Address of New Registered	Agent		
			Name	· · · · · · · · · · · · · · · · · · ·				
SWEET, ROBERT 1155-97 ST.		Street Ac	Street Address (P.O. Box Number is Not Acceptable)					
unit 203 Bay har	BOR ISLAND FL 33154		City		FL	Zip Code	 e	
SIGNATURE	Signature, typed or printed name of registered agent an FILE NOW: FEE IS \$61.25	d title if applicable. (NOTE: R 9. Election Campaign Fi Trust Fund Contributi	inancing	\$5.00 May Be Added to Fees	Make Check Departmen			
10.	OFFICERS AND DIRE	ECTORS	11.	ADDITIONS/CH	ANGES TO OFFICERS AND D	RECTORS IN	10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SWEET, ROBERT 1155-97 ST, UNIT 203 BAY HARBOR ISLAND FL 33154	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Dir Maxine Gold 1155 - 97 S Bay Harbor			Addition	CR2E037 (10/00)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GOLD, MAXINE 1155-97 ST, UNIT 201 MIAMI FL 33154	X ₩ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Harry Valdi 1155 - 97 S Bay Harbor		XX Change	Addition	CR2I
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ANDRADE, JOSE 1155-97 ST, UNIT 503 MIAMI FL 33154	XX Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice Presid Mark Wonder 1155 - 97 S	ent	XIX Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MERINO-ANDRADE, ANGELICA 1155-97 ST, UNIT 403 MIAMI FL 33154	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		lero t, Unit 502 Island, Fla 3315		XX Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ISRAEL, NEUSA	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TITLE		☐ Delete	TITLE			☐ Change	Addition	1

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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

(Kuyelia) (LIS)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/24/01

Daytime Phone #