2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2001 8:00 am
Secretary of State
05-19-2001 90281 013 ****61.25

DOCUMENT # 723739

D0055677

1. Entity Name
THE TOWNHOUSES @ NOVA CONDOMINIUM, INC #3
3745 SW 59 AVENUE
DAVIE, FLA. 33314

Principal Place of Business	Mailing Address
3745 SW 59 Ave. DAVIE, FL 33314	3745 SW 59 Ave DAVIE, Fl. 33314

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
3745 SW 59 Ave.	3745 SW 59 Ave
Suite, Apt. #, etc.	Suite, Apt. #, etc. B
City & State: DAVIE, FLA.	City & State: DAVIE, Fl.
Zip: 33314 Country: USA	Zip: 33314 Country: USA

4. FEI Number 65-0284335 ☐ 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
ARLENE FISHER 3745 SW 59 Ave. DAVIE, Fl. 33314	Name: ARLENE FISHER Street Address (P.O. Box Number is Not Acceptable): 3745 SW 59 Ave. City: DAVIE FL Zip Code: 33314

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: ✓ Arlene Fisher 5-07-01
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 PRES NAME STREET ADDRESS CITY-ST-ZIP	ARLENE FISHER 3745 SW 59 Ave. DAVIE, Fl. 33314	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE SEC NAME STREET ADDRESS CITY-ST-ZIP	LINDA WILLIAMS 2653 SW 59 Ave. DAVIE, Fl. 33314	☑ Delete	TITLE SEC. NAME STREET ADDRESS CITY-ST-ZIP	SANDRA BURSZTYN 3749 SW 59 Ave. DAVIE, Fl. 33314 ☐ Change ☑ Addition
TITLE TREAS NAME STREET ADDRESS CITY-ST-ZIP	BARBARA LAROCCA 3701 SW 59 Ave. DAVIE, FLA. 33314	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE DIR. NAME STREET ADDRESS CITY-ST-ZIP	LENA HARLEY 3739 SW 59 Ave. DAVIE, Fl. 33314	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE DIR NAME STREET ADDRESS CITY-ST-ZIP	ROBERTO MEDERO 3729 SW 59 Ave DAVIE, Fl. 33314	☑ Delete	TITLE DIR. NAME STREET ADDRESS CITY-ST-ZIP	SANDY MEDERO 3729 SW 59 Ave DAVIE, Fl. 33314 ☐ Change ☑ Addition
TITLE DIR NAME STREET ADDRESS CITY-ST-ZIP	DANNY FISHER 12850 SR 84-25 DAVIE, Fl. 33324	☑ Delete	TITLE DIR NAME STREET ADDRESS CITY-ST-ZIP	TERRI JOHANSON 3753 SW 59 Ave DAVIE, Fl. 33314 ☐ Change ☑ Addition

CR2E037 (11/00)

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: X Arlene Fisher ARLENE FISHER PRESIDENT 5/07/01 954-584-3710
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #