AMENDED

DOCUMENT # N00000001111

1. Entity Name

100 Hidden Bay Condominium Association, Inc.

(14)

06-15-2001 90616 019 ****61.25

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 JUN 29 AM 9:19

Principal Place of Business	Mailing Address
3370 N.E. 190th Street Aventura, FL 33180	c/o DCI 2035 Harding Street Suite 200 Hollywood, FL 33020-2797

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0986009 ☐ 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
Schneiderman, Mitchell 3370 N.E. 190th Street Aventura, FL 33180	Name: Bernard S. Meyer Street Address (P.O. Box Number is Not Acceptable): c/o Development Consultants Inc. 2035 Harding Street, Suite 200 City: Hollywood, FL Zip Code: 33020

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 _____ Bernard S. Meyer, Agent 5/24/01

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Collins, John	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Chernis, Paul 3370 N.E. 190th Street Aventura, FL 33180	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VSD Uanino, Anthony	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Exec VPD Fishman, Herbert 3370 N.E. 190th Street Aventura, FL 33180	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT Schneiderman, Mitchell	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Senior VPD Earlman, Michael 3370 N.E. 190th Street Aventura, FL 33180	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD Speranza, Bob 3370 N.E. 190th Street Aventura, FL 33180	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SecretaryD Levine, Sam 3370 N.E. 190th Street Aventura, FL 33180	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer D Helfeld, Arnold 3370 N.E. 190th Street Aventura, FL 33180	☐ Change ☒ Addition

SIGN HERE

AD

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: Mitchell Eichner VP 6-6-01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #