

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 715394

Entity Name

THE SANDS OF KEY BISCAYNE ASSOCIATION, INC.

Principal Place of Business

605 OCEAN DR
KEY BISCAYNE FL 33149

Mailing Address

605 OCEAN DR
KEY BISCAYNE FL 33149

Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1269433

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

KALLICHE, ANTHONY
KALLICHE, XXXXXXXXXXXX MR
BECKER & POLIAKOFF PA
5201 BLUE LAGOON DR #100
MIAMI FL 33126

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

OFFICERS AND DIRECTORS

11.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

NAME	DELETE
VP ELLIOT, MICHAEL 607 OCEAN DRIVE 11L KEY BISCAYNE FL 33149	<input checked="" type="checkbox"/>
D RIVELLI, PAULINE 607 OCEAN DR 10K KEY BISCAYNE FL 33149	<input type="checkbox"/>
S BELOFF, JEROME DR 607 OCEAN DR 3J KEY BISCAYNE FL 33149	<input checked="" type="checkbox"/>
P BOHUTINSKY, ANDREW 613 OCEAN DR 10C KEY BISCAYNE FL 33149	<input checked="" type="checkbox"/>
T BERNSTEIN, SYLVIA 613 OCEAN DR KEY BISCAYNE FL 33149	<input type="checkbox"/>
D GOLDSTEIN, SANDRA 611 OCEAN DR 2 KEY BISCAYNE FL 33149	<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	CHANGE	ADDITION
VICE PRESIDENT	JOE RODANO	607 OCEAN DR 10B	KEY BISCAYNE FL 33149	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SECRETARY	TERESA BENOITO	613 OCEAN DR #11D	KEY BISCAYNE FL, 33149	<input checked="" type="checkbox"/>	<input type="checkbox"/>
TREASURER	SILVIA PENICHER	605 OCEAN DR #4L	KEY BISCAYNE, FL 33149	<input checked="" type="checkbox"/>	<input type="checkbox"/>
PRESIDENT	BERNSTEIN SYLVIA	613 OCEAN DR 11C	KEY BISCAYNE, FL 33149	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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:

S. Bernstein
S. Bernstein, President

2/1/2002

FILED
Feb 20, 2002 8:00 am
Secretary of State

02-20-2002 90126 018 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)