2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 01, 2002 8:00 am
Secretary of State
04-01-2002 90645 030 ****61.25

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DOCUMENT # N23327

1. Entity Name

THE PALMS ON THE CREEK CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
2370 NE 135TH STREET.. #406 NORTH MIAMI FL 33181 US	CDS MANAGEMENT POST OFFICE BOX 17524 PLANTATION FL 33318-7524 US

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 65-0175038 ☐ 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
CDS MANAGEMENT & REAL ESTATE GROUP, INC 300 SOUTH PINE ISLAND ROAD PLANTATION F FL 33324	Name Street Address (P.O. Box Number is Not Acceptable) Suite 238 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 _____ 3/21/02

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	PD DELONG, DONNA M 2370 NE 135TH ST. #209 N MIAMI FL 33181	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD. DIETER H SEIDEL 2370 NE 135th St #408 N MIAMI, FL 33181 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD RODRIGUEZ, CARLOS 2370 NORTH EAST 135 STREET #307 NORTH MIAMI FL 33181	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD NADAL, CHRISTIAN 2370 NE 135TH ST. #205 NORTH MIAMI FL 33181	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer TD JUDY PIGNATELLI 2370 NE 135 ST. #202 N. Miami FL 33181 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MALINE, JODIE 2370 NORTH EAST 135 STREET #302 NORTH MIAMI FL 33181	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (9/01)

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 REQUIRED Vice President 1/10/02 305-354-4658

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