## **2002 UNIFORM BUSINESS REPORT (UBR)**

## **DOCUMENT # N48672**

1. Entity Name

## POMPANO YACHT AND BEACH CLUB CONDOMINIUM ASSOCIA TION, INC.

140 NE 28TH AVENUE

POMPANO BEACH FL 33062

Principal Place of Business

Mailing Address

140 NE 28TH AVENUE

POMPANO BEACH FL 33062

**FILED** May 21, 2002 8:00 am Secretary of State

05-21-2002 91125 006 \*\*\*\*61.25



|   |   | •   |                                   |   |   |  |   |   |  |
|---|---|---|-----------------------------------|---|---|--|---|---|--|
| 2. Principal Place of Business  |   | 3. Mailing Address<br>3300 University D. #405   |                                   |   |   |  |   |   |  |
| Suite, Apt. #, etc.   |   | Suite, Apt. #, etc.   |                                   |   | DO NOT WRITE IN THIS SPACE                                |  |   |   |  |
| City & State  |   | Coral Springs Fl  |                                   |   | 4. FEI Number 65-0346522                                  |  |   | Applied For<br>Not Applicable                           |  |
| Zip   | Country   | <sup>Zip</sup> 33065  | Country<br>U.5A                   | ,   | 5. Certificate  | of Status De                                       | esired  | \$8.75 Add  |  |
| 6. Name and Address of Current Registered Agent   |   |   | <u> </u>                          | 7. Name and Address of New Registered Agent |   |  |   |   |  |
| MINERLEY, KENNETH L  980 N. FEDERAL HIGHWAY, SUITE 205  BOCA RATON FL 33432  Name United Commit Many Carp Street Address (P.O. Box Number is Not Acceptable) 3300 University Drive 4407  City (act Seconds  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   SIgnature, typed or printed name of register(d agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE |   |   |                                   |   |   |  |   |   |  |
| FILE NOW: FEE IS \$61.25  9. Election Carr Trust Fund C   |   |   | npaign Financing<br>Contribution. | <i>- /</i>                                  | \$5.00 May E<br>Added to Fees                             |  | Departm   | ck Payable<br>ent of State                              | •  |
| 10.   | OFFICERS AND DIR  |   | 11. *                             |   | ADDITIONS/CH  | ANGES TO C   | OFFICERS AND (  | DIRECTORS IN  | l 10                                     |
| TITLE PD  | ·   | Delete  | TITLE                             | D4  |   |  |   | ☐ Change  | Addition                                 |
| NAME MCC  | CLELLAN, TIM  | -   | NAME                              | Trot  | tor Lar   | γΥ ,   | <u>م</u>  | 1   | _  |
|   | NE 28TH AVE #401  |   | STREET ADDRESS                    | 337   | ma lal  | ce shor  | e Blud  | Ļ   |  |
|   | MPANO BEACH FL 33062  |   | CITY-ST-ZIP                       | 227   | stake   | 04   | 44095   |   |  |
| TITLE VPD   |   | Delete  | TITLE                             |   | Sie   | UT   | 44010   | Chann   | Addition  Addition                       |
| . –   |   | ₩ Delete  | NAME                              | ND.   | 010 T   | seph   |   | ☐ Change  | Addition                                 |
|   | Y, WILLIAM  |   | STREET ADORESS                    | Hase  | <b>J W</b> I <b>W</b> I                                   |  | 4409  |   |  |
|   | NE 28TH AVE #1007   |   |                                   |   | NE 28   | ) the  |   | <i>(</i> ¬  |  |
| 1 OIV   | <u>IPANO BEACH FL 33062</u>   |   | CITY-ST-ZIP                       | 100   | npano 1   | sen <u> </u>                                       | Ft 330  | 10L   |  |
| TITLE   |   | Delete  | TITLE                             | D   | المراء مط   | A  | 2 0   | Change  | Addition                                 |
|   | BERTS, AUDREY   |   | NAME                              | Char  | nberland  | 470H   | li irre   |   |  |
|   | NE 28TH AVE #508  |   | STREET ADDRESS                    |   | DAE SE  |  |   |   |  |
| CITY-ST-ZIP PON   | IPANO BEACH FL 33062  |   | CITY-ST-ZIP                       | Hon   | naana 7   | 3Ch  | FU 330  | QZ.   |  |
| TITLE D   |   | Delete  | TITLE                             | 5+2   |   | -1000  |   | Change  | Addition                                 |
|   | MBERLAND, GILLES  |   | NAME                              | 12/12                                       | gerala,   | Elair  | K   |   |  |
| STREET ADDRESS 140  | NE 28TH AVE #504  |   | STREET ADDRESS                    | 1 1 1 1 1                                   | 10 LJ Z.X.  | 700  | ~ ~~ <i>,</i>   |   | 1  |
| CITY-ST-ZIP PON   | IPANO BEACH FL 33062  | /   | CITY-ST-ZIP                       | Ron   | naano k   | 3ch F  | 1 330Ce   | 2   | 1  |
| TITLE D   |   | ☑ Delete  | TITLE                             |   |   |  |   | ☐ Change  | Addition                                 |
| NAME LUP  | ien, gilles   |   | NAME                              | G134  | vazemia   | s, Thic  | raei  |   | _  |
|   | NE 28TH AVE., #208  |   | STREET ADDRESS                    | 1,45  | NOR ZR  | ' Ave  | 501   |   |  |
|   | IPANO BEACH FL 33062  |   | CITY-ST-ZIP                       | 1 00  | NE 28   | Boh  | FL 33   | 5067  |  |
| TITLE   |   | ☐ Delete  | TITLE                             | 1   | THE PARTY OF  |  | , , , , , ,   | ☐ Change  | Addition                                 |
| NAME  |   |   | NAME                              |   |   |  |   |   | - Juliani                                |
| STREET ADDRESS  |   | Λ   | STREET ADDRESS                    | i   |   |  |   |   |  |
| CITY-ST-ZIP   | Λ   | n ///-  | CITY-ST-ZIP                       |   |   |  |   |   |  |
|   | that the information supplied with is report or supplemental report is on or the receiver or trustee empo | his filling does not qualify for<br>the and appurate and that m<br>vereg to execute this report a |                                   | ted in Sec<br>ave the s<br>apter 617,       | ction 119.07(3)(i<br>ame legal effec<br>, Florida Statute | ), Florida Sta<br>t as if made is<br>s; and that m | atutes. I further of<br>under oath; that<br>ny name appears | ertify that the ir<br>I am an officer<br>in Block 10 or | nformation<br>or director<br>Block 11 if |

SIGNATURE:

3/21/02 954-783-6665