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2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 04, 2002 8:00 am
Secretary of State
05-14-2002 90342 011 ****61.25

DOCUMENT # 725495

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DO NOT WRITE IN THIS SPACE

1. Entity Name
LIME BAY CONDOMINIUM INC

Principal Place of Business	Mailing Address
9190 LIME BAY BLVD. TAMARAC FL 33321-8605	9190 LIME BAY BLVD. TAMARAC FL 33321-8605

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.: 10034 W McNab Rd	Suite, Apt. #, etc.: 10034 W McNab Rd
City & State: TAMARAC FL	City & State: TAMARAC, Fl
Zip: 33321 Country: BROWARD	Zip: 33321 Country:

4. FEI Number 59-1561496 ☐ 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
GLAZER, ERIC M 1920 EAST HALLANDALE BEACH BLVD. 8TH FLOOR HALLANDALE FL 33009	Name: James R. Miles Street Address (P.O. Box Number is Not Acceptable): Consolidated Community Management 10034 W McNab Rd City: TAMARAC FL Zip Code: 33321

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: J. Miles DATE: 4/2/02
Signature, type or print name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	D WILHELM, SELMA 9070 LIME BAY BLVD TAMARAC FL 33321	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD Daley, Bill 10034 W McNab Rd Tamarac, Fh 33321	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GARFINKLE, ESTHER 9080 LIME BAY BLVD TAMARAC FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD RUDIN, Rudy 10034 W McNab Rd TAMARAC, Fh 33321	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD AGIN, FANNY 9090 LIME BAY BLVD TAMARAC FL 33321	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD AGIN, FANNY 10034 W McNab Rd TAMARAC, Fh 33321	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P BRECHER, HUGH 9081 LIME BAY BLVD TAMARAC FL 33321	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Brecher, Hugh 10034 W McNab Rd TAMARAC, Fh 33321	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP KAYE, GERALD 9080 LIME BAY BLVD TAMARAC FL 33321	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TAYLOR, JOYCE 10034 W McNab Rd TAMARAC, Fh 33321	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S ZOPPEL, PEARL 9080 LIME BAY BLVD. TAMARAC FL	☒ 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: SIGN Hugh C. Brecher, President 5/15/02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #