

**2003 NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jan 10, 2003 8:00 am**  
**Secretary of State**

01-10-2003 90099 005 \*\*\*\*61.25

DOCUMENT # **N18748**

1. Entity Name  
**SHEFFIELD K CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business  
**SHEFFIELD K 266  
WEST PALM BEACH FL 33417**

Mailing Address  
**SHEFFIELD K 266  
WEST PALM BEACH FL 33417**

**70004230**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business  
**Sheffield K 266**

3. Mailing Address  
**Sheffield K-266**

City & State  
**West Palm Beach W. Palm Beach, Fl.**

4. FEI Number **59-2253489**

Applied For  
 Not Applicable

Zip Country  
**33417 Palm Beach 33417 Palm Beach**

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

~~LIPOFSKY, LEONARD~~  
~~SHEFFIELD K 266~~  
~~WEST PALM BEACH FL 33417~~

**BRYNA Stock**  
**268 SHEFFIELD K**  
**WEST PALM BEACH FL 33417**

Name **Bryna Stock**  
Street Address (P.O. Box Number is Not Acceptable)  
**268 Sheffield K**

City **W. Palm Beach** FL Zip Code **33417**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Bryna Stock - Bryna Stock**

DATE **1/6/03**

FILE NOW: FEE IS \$61.25

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

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>LIPOFSKY, LEONARD</b> <b>SHEFFIELD K 266</b> <b>WEST PALM BEACH FL</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP</b> <b>MARSALA, CATHLEEN</b> <b>250 SHEFFIELD K</b> <b>WEST PALM BEACH FL 33417</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>STOCK, BRYNA</b> <b>268 SHEFFIELD K</b> <b>WEST PALM BCH FL</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> <b>SCHNEIDER, HELEN</b> <b>255 SHEFFIELD STE K</b> <b>W. PALM BCH FL</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>ROOSEVELT, SALLY</b> <b>248 SHEFFIELD</b> <b>WEST PALM BEACH FL 33417</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>MARSALA, CHRIS</b> <b>253 SHEFFIELD K</b> <b>WEST PALM BEACH FL 33417</b>	<input checked="" type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>Stock BRYNA</b> <b>268 SHEFFIELD K-266</b> <b>WEST PALM BEACH, FL.</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP</b> <b>MARSALA, CATHLEEN</b> <b>250 SHEFFIELD K</b> <b>WEST PALM BEACH, FL.</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>SALLY ROOSEVELT</b> <b>248 SHEFFIELD K</b> <b>WEST PALM BEACH, FL.</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>LIPOFSKY, LEONARD</b> <b>SHEFFIELD K-266</b> <b>WEST PALM BEACH, FL.</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>DORA WUSZ</b> <b>SHEFFIELD K-253</b> <b>WEST PALM BEACH, FL.</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: **BRYNA Stock - Bryna Stock** 1/6/03 561-687-5706

CR2E037 (10/02)