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

DOCUMENT # 737669

1. Entity Name



FILED Jan 15, 2003 8:00 am Secretary of State

NOVA HILLS NORTH CONDOMINIUM, INC.					01-13-2003 9021	7 010 ****	01.23	
Principal Place of Business 7560 NOVA DR DAVIE FL 33317		Mailing Address 7560 NOVA DR DAVIE FL 33317						
2. Principal I	Place of Business	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES			
City & Sta	ate	City & State		4. FEI Number	59-1890641		oplied For	
Zip	Country	Zip	Country	5. Certificate of	Status Desired	\$8.75 Add Fee Require		
	6. Name and Address of Curren	t Registered Agent		7. Name and A	ddress of New Registered	Agent .		
COLOW	DAM		Name	_			~~~	
	WADR 7528 Nov	A Dune	Street Ad	ldress (P.O. Box Number i	s Not Acceptable)			
DAVIE FI	L 33317							
			City		F	L Zip Cod	le	
8. The above	e named entity submits this statement t	for the purpose of changing its re	egistered office or i	registered agent, or both,	in the State of Florida. I am	n familiar with,	and accept	
tile obliga	tions of registered agent.	\mathcal{N}		4				
SIGNATURE:	JAM SOLOW	Kan	n det	ou	1.5-6	オ ろ		
	Signature, typed or printed name of registered ager	and title if applicable. (NOTE: I	Registered Agent signatur	e required when reinstating)	DATE			
1. 1	S. 27.1							
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	FILE NOW: FEE IS \$61.25	9. Election Camp		\$5.00 May Be	Make Ched			
	FILE NOW: FEE IS \$61.25	9. Election Camp Trust Fund Co		\$5.00 May Be Added to Fees	Make Cheo Florida Depa			
10.	FILE NOW: FEE IS \$61.25	Trust Fund Co	ntribution.	Added to Fees ADDITIONS/CHAN	Florida Depa	rtment of S	State	
) 4	OFFICERS AND D	Trust Fund Co	ntribution.	Added to Fees ADDITIONS/CHAN	Florida Depa	rtment of S	State	
10. TITLE NAME	OFFICERS AND D	Trust Fund Col	11.	Added to Fees ADDITIONS/CHAN	Florida Depa	rtment of S	State	
10. TITLE NAME STREET ADDRESS	OFFICERS AND D PD SOLOW, PAM 7528 NOVA DR	Trust Fund Col	11. TITLE NAME STREET ADDRESS	Added to Fees ADDITIONS/CHAN SIERES DONNA ME	Florida Depa GES TO OFFICERS AND D TNGS TON DRIVE	rtment of S	State	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND D PD SOLOW, PAM 7528 NOVA DR DAVIE FL 33317	Trust Fund Co	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Added to Fees ADDITIONS/CHAN SECRETOR DON N A ME 7506 NOVA DAVIE FI	Florida Department of the State	PIRECTORS IN Change	I 10 Addition	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND D PD SOLOW, PAM 7528 NOVA DR DAVIE FL 33317 VD	Trust Fund Col	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Added to Fees ADDITIONS/CHAN SECRETOR DON N A ME 7506 NOVA DAVIE FI	Florida Department of the State	PIRECTORS IN Change	State	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND D PD SOLOW, PAM 7528 NOVA DR DAVIE FL 33317 VD BROWNE, REGINALD	Trust Fund Co	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Added to Fees ADDITIONS/CHAN SICELE DON NA ME 7506NOVA DAUTE F) TREASYRE	Florida Department of the STON DRIVE 33317 CCT ANT	PIRECTORS IN Change	I 10 Addition	
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indicated on this report or 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: 7

Solow

1.5.03 305-325-5692