

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

FILED
Jan 23, 2003 8:00 am
Secretary of State

01-23-2003 90085 003 ****61.25

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1. Entity Name

SHORELAND ESTATES CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

% GARRY S BERGMAN, CPA, PA
499 NW 70 AVE. STE 116
PLANTATION FL 33317
US

Mailing Address

% GARRY S BERGMAN, CPA, PA
499 NW 70 AVE. STE 116
PLANTATION FL 33317
US

2. Principal Place of Business

% GARRY S BERGMAN CPA PA
Suite, Apt #, etc.
8211 W. BROWARD BLVD #440

3. Mailing Address

% GARRY S BERGMAN CPA PA
Suite, Apt #, etc.
8211 W. BROWARD BLVD #440



☐ CHECK HERE IF MAKING CHANGES

City & State

PLANTATION FL 33324

City & State

PLANTATION FL 33324

4. FEI Number 59-2077007

Applied For

Not Applicable

Zip

33324

Country

USA

Zip

33324

Country

USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JONES, TERRY
3537 N.E. 171 STREET
NORTH MIAMI BEACH FL 33160

7. Name and Address of New Registered Agent

Name **ALLAN KNIGHT**

Street Address (P.O. Box Number is Not Acceptable)
3549 N.E. 171 ST

City **NORTH MIAMI BEACH**

FL

Zip Code
33160

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1-17-03

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

TITLE PD
NAME JONES, TERRY
STREET ADDRESS 3537 N.E. 171 STREET
CITY-ST-ZIP NORTH MIAMI BEACH FL 33160 ☒ Delete

TITLE VP
NAME ADAM, MICHEL
STREET ADDRESS 3501 N.E. 171 STREET
CITY-ST-ZIP NORTH MIAMI BEACH FL 33160 ☐ Delete

TITLE DS
NAME AUGENSTEIN, COREY
STREET ADDRESS 3529 N.E. 171 STREET
CITY-ST-ZIP NORTH MIAMI BEACH FL 33160 ☒ Delete

TITLE D
NAME MEYERS, BARRY
STREET ADDRESS 3553 N.E. 191ST STREET
CITY-ST-ZIP NORTH MIAMI BEACH FL 33160 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME ALLAN KNIGHT
STREET ADDRESS 3549 NE 171 ST.
CITY-ST-ZIP NORTH MIAMI BEACH FL 33160 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE DS
NAME RHOBA FRIEDMAN
STREET ADDRESS 3533 NE 171 ST
CITY-ST-ZIP NORTH MIAMI BEACH, FL 33160 ☒ Change ☐ Addition

TITLE DT
NAME BARRY MEYERS
STREET ADDRESS 3553 NE 171 ST
CITY-ST-ZIP NORTH MIAMI BEACH, FL 33160 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ 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 or other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

1-17-03 (305) 445-2007

CR2E037 (10/02)