

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

**FILED**  
**Apr 28, 2003 8:00 am**  
**Secretary of State**

04-28-2003 90283 004 \*\*\*\*61.25

**DOCUMENT # N46416**

1. Entity Name

**14TH STREET TOWNHOMES ASSOCIATION, INC.**



Principal Place of Business

**3170 N. FEDERAL HIGHWAY  
SUITE 100  
LIGHTHOUSE POINT FL 33064**

Mailing Address

**3170 N. FEDERAL HIGHWAY  
SUITE 100  
LIGHTHOUSE POINT FL 33064**

**11018997**



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

**2501 NE 14th St.**

3. Mailing Address

**2501 NE 14th Street**

Suite, Apt. #, etc.

**# 308**

Suite, Apt. #, etc.

**# 308**

City & State

**Pompano Beach, FL**

City & State

**Pompano Beach, FL**

Zip

**33062**

Country

**US**

Zip

**33062**

Country

**US**

4. FEI Number **65-0303620**

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**SMITH, ROBERT H  
3170 N. FEDERAL HIGHWAY  
SUITE 100  
LIGHTHOUSE POINT FL 33064**

7. Name and Address of New Registered Agent

Name **Andrea Cargill**  
Street Address (P.O. Box Number is Not Acceptable)  
**2501 NE 14th Street**  
**# 308**  
City **Pompano Beach** FL Zip Code **33062**

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

**Andrea Cargill** **Andrea Cargill**

**4/22/03**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**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          | VTD                              | <input checked="" type="checkbox"/> Delete |
| NAME           | MCEACHERN, LEWIS                 |                                            |
| STREET ADDRESS | 2381 NE 14TH ST., UNIT 207       |                                            |
| CITY-ST-ZIP    | POMPANO BEACH FL 33062           |                                            |
| TITLE          | SD                               | <input checked="" type="checkbox"/> Delete |
| NAME           | TEBOUL, SANDRA                   |                                            |
| STREET ADDRESS | 2381 N.E.-14TH STREET - UNIT 206 |                                            |
| CITY-ST-ZIP    | POMPANO BEACH FL 33062           |                                            |
| TITLE          | PD                               | <input checked="" type="checkbox"/> Delete |
| NAME           | HARRIS, SIDNEY                   |                                            |
| STREET ADDRESS | 2501 NE 14TH ST., UNIT 301       |                                            |
| CITY-ST-ZIP    | POMPANO BEACH FL 33062           |                                            |
| TITLE          | D                                | <input checked="" type="checkbox"/> Delete |
| NAME           | SMITH, JEAN                      |                                            |
| STREET ADDRESS | 2471 N.E. 14TH STREET - UNIT 101 |                                            |
| CITY-ST-ZIP    | POMPANO BEACH FL 33062           |                                            |
| TITLE          | D                                | <input checked="" type="checkbox"/> Delete |
| NAME           | DISTEFANO, ANTHONY               |                                            |
| STREET ADDRESS | 2471 NE 14TH ST., UNIT 102       |                                            |
| CITY-ST-ZIP    | POMPANO BEACH FL 33062           |                                            |
| TITLE          | D                                | <input checked="" type="checkbox"/> Delete |
| NAME           | MARINO, PAUL                     |                                            |
| STREET ADDRESS | 2381 N.E. 14TH ST., UNIT 208     |                                            |
| CITY-ST-ZIP    | POMPANO BEACH FL 33062           |                                            |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

|                |                           |                                                                              |
|----------------|---------------------------|------------------------------------------------------------------------------|
| TITLE          | V                         | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | DORN, Janice              |                                                                              |
| STREET ADDRESS | 2351 NE 14th St, Unit 53B |                                                                              |
| CITY-ST-ZIP    | Pompano Beach, FL 33062   |                                                                              |
| TITLE          | S                         | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | Cargill, Andrea           |                                                                              |
| STREET ADDRESS | 2351 NE 14th St, Unit 53b |                                                                              |
| CITY-ST-ZIP    | Pompano Beach, FL 33062   |                                                                              |
| TITLE          | P                         | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | Damasceno, Nick           |                                                                              |
| STREET ADDRESS | 2381 NE 14th St, Unit 201 |                                                                              |
| CITY-ST-ZIP    | Pompano Beach, FL 33062   |                                                                              |
| TITLE          | T                         | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | Hudson, Joan              |                                                                              |
| STREET ADDRESS | 2471 NE 14th St, Unit 105 |                                                                              |
| CITY-ST-ZIP    | Pompano Beach, FL 33062   |                                                                              |
| TITLE          | D                         | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | Tribett, Margaret         |                                                                              |
| STREET ADDRESS | 2381 NE 14th St, Unit 210 |                                                                              |
| CITY-ST-ZIP    | Pompano Beach, FL 33062   |                                                                              |
| TITLE          | D                         | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | Vollaro, Anthony          |                                                                              |
| STREET ADDRESS | 2351 NE 14th St, Unit 53F |                                                                              |
| CITY-ST-ZIP    | Pompano Beach, FL 33062   |                                                                              |

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: **Andrea L. Cargill, Secretary** **Andrea L. Cargill** **4/22/03** **954/785-0181**

CR2E037 (10/02)