

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

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

04-28-2003 90288 014 ****61.25

DOCUMENT # N45204

1. Entity Name
W.P.B. BERKSHIRE A CONDO ASS'N INC.



Principal Place of Business

**BERKSHIRE A
WEST PALM BEACH FL 33417**

Mailing Address

**BERKSHIRE A
WEST PALM BEACH FL 33417**

2. Principal Place of Business

6 Berkshire A

3. Mailing Address

6 Berkshire A

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

West Palm Beach FL

City & State

West Palm Beach FL

Zip

33417

Country

USA

Zip

33417

Country

USA

4. FEI Number **65-0333728**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**WEINBERG, SIDNEY
18 BERKSHIRE A
WEST PALM BEACH FL 33417**

7. Name and Address of New Registered Agent

Name **Sam Horowitz**

Street Address (P.O. Box Number is Not Acceptable)

6 Berkshire A

West Palm Beach

City

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

SAM HOROWITZ

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 **VPD** ☒ Delete
NAME **MILDRED, ALLEN**
STREET ADDRESS **7 BERKSHIRE A**
CITY-ST-ZIP **WEST PALM BEACH FL 33417**

TITLE **P** ☐ Delete
NAME **HOROWITZ, SAM**
STREET ADDRESS **6 BERKSHIRE A**
CITY-ST-ZIP **W PALM BCH FL 33417**

TITLE **SD** ☐ Delete
NAME **QUINTO, PATRICIA**
STREET ADDRESS **1 BERKSHIRE A**
CITY-ST-ZIP **WEST PALM BEACH FL 33417**

TITLE **TD** ☒ Delete
NAME **WEINBERG, SIDNEY**
STREET ADDRESS **18 BERKSHIRE A**
CITY-ST-ZIP **W PALM BCH FL 33417**

TITLE **D** ☐ Delete
NAME **ORILLO, ALFRED**
STREET ADDRESS **21 BERKSHIRE A**
CITY-ST-ZIP **WEST PALM BEACH FL 33417**

TITLE **D** ☐ Delete
NAME **THOMAS, DIANA**
STREET ADDRESS **12 BERKSHIRE A**
CITY-ST-ZIP **W PALM BCH FL 33417**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **VPD** ☒ Change ☐ Addition
NAME **JIM HENSON**
STREET ADDRESS **17 Berkshire A**
CITY-ST-ZIP **West Palm Beach FL 33417**

TITLE **PRES.** ☐ Change ☐ Addition
NAME **Sam Horowitz**
STREET ADDRESS **6 Berkshire A**
CITY-ST-ZIP **West Palm Beach FL 33417**

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

TITLE **TD** ☒ Change ☐ Addition
NAME **NAPODANO, ELIZABETH**
STREET ADDRESS **3545 Taft St (25 Berkshire A)**
CITY-ST-ZIP **Wantagh NY 11793**

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

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Change ☐ Addition
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 all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

ELIZABETH NAPODANO

4/5/03

826-0533

CR2E037 (10/02)