FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Apr 26, 2001 8:00 am Secretary of State **DOCUMENT # 704775** 1. Entity Name HILLSBORO-IMPERIAL APARTMENTS, INC. 04-26-2001 90241 018 ****61.25 Principal Place of Business Mailing Address 1199 HILLSBORO MILE A1A 1199 HILLSBORO MILE A1A HILLSBORO BEACH FL 33062-1508 HILLSBORO BEACH FL 33062-1508 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1004326 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) BECKER & POLIAKOFF, P.A. 3111 STIRLING ROAD FT. LAUDERDALE FL 33312 Zip Code 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be Trust Fund Contribution. FEE IS \$61.25 Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE Delete TITLE Change ▼ Addition SCHNELKER, DIANE NAME NAME Gregory Dunn STREET ADDRESS 1198 HILLSBORO MILE, APT 120 STREET ADDRESS 1198 Hillsboro Mile Apt. 236 Hillsboro Beach, Fl 33062 CITY-ST-ZIP CITY-ST-ZIP HILLSBORO BEACH FL 33062 TITLE ☐ Delete TITLE ☐ Addition WOODRUFF, ALAN NAME NAME Woodruff, Alan STREET ADDRESS 1199 HILLSBORO MILE, APT 227 STREET ADDRESS 1199 Hillsboro Mile, Apt 227 CITY-ST-ZIP CITY-ST-ZIP HILLSBORO BEACH FL 33062 Hillsboro Beach, Fl 33062 TITLE ☐ Delete TITLE S ☐ Addition LORENTZEN, MAUDE NAME NAME Lorentzen, Maude 1198 Hillsboro Mile, Apt 214 1198 HILLSBORO MILE, APT 214 STREET ADDRESS STREET ADDRESS Hillsboro Beach, Fl CITY-ST-ZIP CITY-ST-ZIP HILLSBORO BEACH FL 33062 TITLE D X Delete TITLE X Addition FIELD, MAXINE NAME Stauble, Robert STREET ADDRESS 1199 HILLSBORO MILE, #319 STREET ADDRESS 1199 Hillsboro Mille, Apt.329 Hillsboro Beach, Fl 33062 CITY-ST-ZIP HILLSBORO BEACH FL 33062 CITY-ST-ZIP K) Delete TITLE X Addition **CURTIS, DWAINE** NAME Harvey, Majorie STREET ADDRESS 1198 HILLSBORO MILE, APT 114 STREET ADDRESS 1199 Hillsboro Mile Apt. 105 CITY-ST-ZIP CITY-ST-ZIP Hillsboro Beach, Fl 33062 HILLSBORO BEACH FL 33062 Delete TITLE DESORMEAUX, CLAUDE NAME NAME MacDonnell, Jacqueline STREET ADDRESS STREET ADDRESS 1199 HILLSBORO MILE, APT 331 1199 Hillsboro Mile Apt CITY-ST-ZIP HILLSBORO BCH FL 33062 Hillsboro Beach, Fl

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 employered 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 expression of the corporation of the corporation of the receiver or trustee employered to be supplemental to the corporation of the corporation of the receiver of trustee employered to be supplemental to the corporation of the corporation of the corporation of the receiver of trustee employered to be supplemental to the corporation of the corporation of the corporation of the receiver of trustee employered to the corporation of the receiver of trustee employered to the corporation of t

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR