

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 01, 2001 8:00 am
Secretary of State

03-01-2001 90023 011 ****61.25

DOCUMENT # 706397

1. Entity Name

TOWN COLONY CONDOMINIUM CORPORATION, INC.

Principal Place of Business

Mailing Address

C/O BRUCE D. DICKSON
 2916 FUNSTON ST. APT 47
 HOLLYWOOD FL 33020

C/O BRUCE D. DICKSON
 2916 FUNSTON ST. APT 47
 HOLLYWOOD FL 33020

00000741



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1708878

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DICKSON, BRUCE D
2916 FUNSTON ST. APT 47
HOLLYWOOD FL 33020

Name

Horizon Maintenance

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

3211 N. 74th Ave, Suite 1

City

Hollywood

FL

Zip Code

33024

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:
FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input type="checkbox"/> Delete
NAME	CLEWIS, GAYLE	
STREET ADDRESS	2918 FUNSTON ST	
CITY-ST-ZIP	HOLLYWOOD FL 33020	
TITLE	D President/Treasurer	<input type="checkbox"/> Delete
NAME	ESTELLE, KARR	
STREET ADDRESS	2918 FUNSTON ST	
CITY-ST-ZIP	HOLLYWOOD FL 33020	
TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	DICKSON, BRUCE D	
STREET ADDRESS	2916 FUNSTON ST.	
CITY-ST-ZIP	HOLLYWOOD FL 33020	
TITLE	D	<input type="checkbox"/> Delete
NAME	AUERBACK, MARY	
STREET ADDRESS	2916 FUNSTON ST	
CITY-ST-ZIP	HOLLYWOOD FL 33020	
TITLE	D	<input type="checkbox"/> Delete
NAME	ANELLO, JUNE	
STREET ADDRESS	2915 PLUNKETT ST.	
CITY-ST-ZIP	HOLLYWOOD FL	
TITLE	D Secretary	<input type="checkbox"/> Delete
NAME	MESSINA, MARIE	
STREET ADDRESS	2918 FUNSTON ST #39	
CITY-ST-ZIP	FOLLYWOOD FL	

TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Brenda Gliddon	
STREET ADDRESS	2918 Funston St	
CITY-ST-ZIP	Hollywood, FL 33020	
TITLE	AL Gajewski	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	AL Gajewski	
STREET ADDRESS	2918 Funston St	
CITY-ST-ZIP	Hollywood, FL 33020	
TITLE	Michael Knapp	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Michael Knapp	
STREET ADDRESS	2917 Plunkett St	
CITY-ST-ZIP	Hollywood, FL 33020	
TITLE	DIANE JOHNSON	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DIANE JOHNSON	
STREET ADDRESS	2916 Funston St	
CITY-ST-ZIP	Hollywood, FL 33020	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

Estelle Karr ESTELLE KARR

2/21/01

954-925-0870

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)