

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 08, 2001 8:00 am
Secretary of State

0001268

DOCUMENT # 710130

1. Entity Name

THE BARCLAY ARMS CONDOMINIUM APARTMENTS, INC.

02-08-2001 90375 028 ****61.25

Principal Place of Business

Mailing Address

1943 MONROE STREET
 HOLLYWOOD FL 33020

1943 MONROE STREET
 HOLLYWOOD FL 33020

A0021170



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

59-1202101

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

RICHARDS, IRWIN
 1943 MONROE ST.
 APT. 101
 HOLLYWOOD FL 33020

Name **PETER S. Amodio**

Street Address (P.O. Box Number is Not Acceptable)
1943 MONROE ST. APT. 309

HOLLYWOOD,

City

FL

Zip Code

33020

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 **PETER S. Amodio**

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

Peter S. Amodio

(NOTE: Registered Agent signature required when reinstating)

2/3/01

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	VD	<input type="checkbox"/> Delete
NAME	TRAFFORD, EDWARD	
STREET ADDRESS	1943 MONROE STREET APT 209	
CITY-ST-ZIP	HOLLYWOOD FL	
TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	RICHARDS, IRWIN	
STREET ADDRESS	1943 MONROE STREET #101	
CITY-ST-ZIP	HOLLYWOOD FL	
TITLE	T	<input type="checkbox"/> Delete
NAME	GARNEAU, FELIX	
STREET ADDRESS	1943 MONROE ST. #104	
CITY-ST-ZIP	HOLLYWOOD FL	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	GEBHARD, WILLIAM E	
STREET ADDRESS	1943 MONROE ST. #208	
CITY-ST-ZIP	HOLLYWOOD FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	HILBERTH, KURT	
STREET ADDRESS	1943 MONROE ST, #202	
CITY-ST-ZIP	HOLLYWOOD FL 33020	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	IRWIN Amodio PETER	
STREET ADDRESS	1943 MONROE STREET #309	
CITY-ST-ZIP	HOLLYWOOD, FL. 33020	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GORDON KECIA	
STREET ADDRESS	1943 MONROE STREET, # 301	
CITY-ST-ZIP	HOLLYWOOD, FL. 33020	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SERRANO DANIEL	
STREET ADDRESS	1943 MONROE STREET #109	
CITY-ST-ZIP	HOLLYWOOD, FL. 33020	

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: **PETER S. AMODIO**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Peter S. Amodio **2/3/01** (1-954-925-8789)

Date

Daytime Phone #

CR2E037 (10/00)