

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

FILED
Feb 24, 2003 8:00 am
Secretary of State

02-24-2003 90950 008 ****61.25

DOCUMENT # 710818

1. Entity Name

9300 WEST BAY HARBOR DRIVE CONDOMINIUM, INC.



Principal Place of Business

**9300 WEST BAY HARBOR DRIVE
BAY HARBOR ISLANDS FL 33154**

Mailing Address

**9300 W BAY HARBOR DR APT. 4-B
APT. 2-A
BAY HARBORS ISLANDS FL 33154
US**

2. Principal Place of Business

3. Mailing Address

9300 W. BAY HARBOR DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4-B

City & State

City & State

BAY HARBOR ISL, FL

Zip

Country

Zip

Country

33154

USA



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-1154462**

Applied For

Not Applicable

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

**WALLACE, ILEENE S
9300 WEST BAY HARBOR DRIVE
4B
BAY HARBOR ISLAND FL 33154**

Name

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

City

FL

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. I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☐ Delete
NAME **LIPTON, DELSIE**
STREET ADDRESS **9300 W BAY HARBOR DRIVE, 2B**
CITY-ST-ZIP **BAY HARBOR ISL FL 33154**

TITLE **DIRECTOR** ☐ Change ☒ Addition
NAME **ROXIE ZUSMER**
STREET ADDRESS **9300 W. BAY HARBOR DR, 1B**
CITY-ST-ZIP **BAY HARBOR ISL, FL 33154**

TITLE **SD** ☐ Delete
NAME **MORRIS, MYNRA**
STREET ADDRESS **9300 W BAY HARBOR DR**
CITY-ST-ZIP **BAY HARBOR ISL FL 33154**

TITLE **DIRECTOR** ☐ Change ☒ Addition
NAME **ED ROBERTS**
STREET ADDRESS **9300 W. BAY HARBOR DR. 2A**
CITY-ST-ZIP **BAY HARBOR ISL, FL 33154**

TITLE **TD** ☐ Delete
NAME **WALLACE, ILEENE S**
STREET ADDRESS **9300 WEST BAY HARBOR DRIVE**
CITY-ST-ZIP **BAY HARBOR ISL FL 33154**

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

TITLE ☐ Delete
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CITY-ST-ZIP

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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: **Ileene S. WALLACE**
Ileene S. Wallace

2/21/03 305/864-8614

CR2E037 (10/02)