2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

FILED DOCUMENT # 716814 Mar 14, 2000 8:00 am 1. Entity Name **Secretary of State** CRYSTAL COURT MANOR NO. 14 CONDOMINIUM, INC. 03-14-2000 90078 015 ****61.25 Principal Place of Business Mailing Address 1550 NORTH 12 COURT 1550 NORTH 12 COURT HOLLYWOOD FL 33019 HOLLYWOOD FL 33019-3264 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 06-0095868 Not Applicable Zip Country \$8.75 Additional Country 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) ISABELLA. MARY ANN 1554 N 12TH CT 9A HOLLYWOOD FL 33019 Zip Code City 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 (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees **Department of State FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. ☐ Addition TITLE PD ☐ De ete TITLE ☐ Change NAME **ROY FACCI** NAME STREET ADDRESS STREET ADDRESS 1550 N 12TH CT 4-B CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL TITI F ☐ Delete TITLE ☐ Change ☐ Addition NAME PETER BONAVITA NAME STREET ADDRESS STREET ADDRESS 1550 N 12TH CT 2A CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL Delete ☐ Change Addition ____ TITI F TD. TITLE NAME ISABELLA, MARY ANN NAME STREET ADDRESS STREET ADDRESS 1550 N12TH CT 2B CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL ☐ Delete TITLE ☐ Change ■ Addition TITLE TD VISCARDI, SEBASTIAN NAME NAME STREET ADDRESS STREET ADDRESS 1550 N 12TH CT 2B CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL ☐ Change ☐ Addition TITLE ☐ Delate TITLE SDA BARNES, FREDRIC NAME NAME STREET ADDRESS STREET ADDRESS 1550 N 12TH CT 8B CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL ☐ Addition ☐ Delete ☐ Change TITLE nT TITLE PASCIOLLA, ANGELO NAME NAME STREET ADDRESS STREET ADDRESS 1554 N 12TH CT 15 A CITY-ST-7IP CITY-ST-ZIP HOLLYWOOD FL 33019 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

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