

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 02, 2001 8:00 am
Secretary of State

03-14-2001 90474 007 ****61.25

DOCUMENT # 718749

1. Entity Name

CONDOMINIUM ASSOCIATION OF LA MER ESTATES, INC.

Principal Place of Business

1890 SOUTH OCEAN DRIVE
 HALLANDALE FL 33009

Mailing Address

1890 SOUTH OCEAN DRIVE
 HALLANDALE FL 33009

67273



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

59-1321610

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

LAW OFFICES OF ERIC M. GLAZER, P.A.
 1920 E. HALLANDALE BEACH BLVD., 8TH FL
 HALLANDALE FL 33009

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.

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

TITLE PD ☐ Delete
 NAME SINGERMAN, DAVID "D"
 STREET ADDRESS 1890 S OCEAN DR
 CITY-ST-ZIP HALLANDALE FL 33009 PRESIDENT

TITLE VPD ☒ Delete
 NAME MILLER, MARTIN
 STREET ADDRESS 1890 S OCEAN DR
 CITY-ST-ZIP HALLANDALE FL 33009

TITLE SD ☒ Delete
 NAME GABLE, MICHAEL
 STREET ADDRESS 1890 S OCEAN DR
 CITY-ST-ZIP HALLANDALE FL 33009

TITLE TD ☐ Delete
 NAME MILLER, JACK "D"
 STREET ADDRESS 1890 S OCEAN DR
 CITY-ST-ZIP HALLANDALE FL 33009 TREASURER

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Vice-President "D" ☐ Change ☒ Addition
 NAME Lenkov, Abe
 STREET ADDRESS 1890 S Ocean Drive
 CITY-ST-ZIP Hallandale Beach, FL 33009 VICE-PRESIDENT

TITLE Secretary "D" ☐ Change ☒ Addition
 NAME Weisbrot, Gary
 STREET ADDRESS 1890 S Ocean Drive
 CITY-ST-ZIP Hallandale Beach, FL 33009 SECRETARY

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

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

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

TITLE ☐ Change ☐ 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:

SIGNATURE REQUIRED

3/10/01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)