2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)** DOCUMENT # 719722 THE VICTORIAN CONDOMINIUM APARTMENTS, INC. Principal Place of Business Mailing Address

FILED Apr 30, 2003 8:00 am § Secretary of State

04-30-2003 90016 009 ****61.25

Principal Place of B	usiness	Mailing Address					
2401 PARK AVE. APT. 2 2401			1401 PARK AVE. APT. 2 RVIERA BEACH FL 33404		· •		
				# 1888H 1888H 1888H 188	. 1811 1881 21614 1281 1282	BU 1180 BUTA BERU 1180 1481	
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES			
City & State		City & State		4. FEI Number NOT APPLICABLE Applied For Not Applicable			
Zip	Country	Zip	Country	5. Certificate of Stat	us Desired	Desired \$8.75 Additional Fee Required	
6.	Name and Address of Curi	ent Registered Agent		7. Name and Address of New Registered Agent			
			Name				
MALT, ALFRED 2401 PARK AV	E, apt 2		Street Add	ddress (P.O. Box Number is Not Acceptable)			
RIVIERA BEAC	n FL 33404		Cily		FI	Zip Code	
	d entity submits this stateme f registered agent.	nt for the purpose of changii	ng its registered office or re	gistered agent, or both, in th	e State of Florida. I am	familiar with, and accept	
SIGNATURE							
Signatu	re, typed or printed name of registered a	gent and title if applicable.	(NOTE: Registered Agent signature r	equired when reinstating)	DATE		
FILE	NOW: FEE IS \$61.25		n Campaign Financing und Contribution.	\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State		
10.	OFFICERS AND	D DIRECTORS	11.	ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		

FILE NOW, FEE 13 \$01.25		Trust Fund Contribution.		Added to Fees	Florida Department of State				
10.	OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE NAME STREET AUDRESS CITY-ST-ZIP	D Lockhart, Elizabeth Rt 70 & Haynes CR Lane Medford NJ	Delete	TITLE I. NAME STREET ADDRESS CITY-ST-ZIP	240, PAR	MALT KAVE, #2 BOH, FL.		☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LOCKHART, DR. GORDON N RT 70 & HAYNES CR LANE MEDFORD NJ	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PATRICK 107 VILL BARDON	SHEEHY AGE GREE	□ Change	☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST Malt, Alfred 2401 Park Ave, Apt. 2 Riviera Beach Fl	⊠ elete ∵	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T.T. ANDY I 9 TO WED EDGIEWA	MJERS'	Change	☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HEAL, MARTHA SALEM RD BURLINGTON NJ	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	9 4.		☐ Change	Addition		
TITLE NAME STREET ADORESS CITY-ST-ZIP	D ERICKSON, RALPH 2401 PARK AVE, APT #1 RIVIERA BEACH FL 33404-4712	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition		

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.

EAKFRED S. HALT