

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 11, 2002 8:00 am**  
**Secretary of State**

04-11-2002 90027 009 \*\*\*\*61.25

**DOCUMENT # 720543**

1. Entity Name

**CORONET HAVEN CONDOMINIUM, INC.**

Principal Place of Business

Mailing Address

2236 JACKSON ST  
 HOLLYWOOD FL 33020  
 US

2236 JACKSON ST  
 #6  
 HOLLYWOOD FL 33020  
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

2236 JACKSON ST

#4

HOLLYWOOD, FL

33020

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1416051

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

MENEGAZZO, DORIS  
 2236 JACKSON STREET  
 SUITE 6  
 HOLLYWOOD FL 33020

Name

CHRISTINE AUCLAIR

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

2236 JACKSON STREET

UNIT #4

City

HOLLYWOOD

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

*Christine Auclair*

Sec. tres CHRISTINE AUCLAIR April 27, 2002

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<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>CUMMINS, AIDAN<br>2236 JACKSON ST., #7<br>HOLLYWOOD FL             | <input type="checkbox"/> Delete            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | P<br>AUCLAIR, CHRISTINE<br>2236 JACKSON ST., #4<br>HOLLYWOOD FL 33020   | <input type="checkbox"/> Delete            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>BERTHOLD, HEINZ<br>2236 JACKSON STREET #3<br>HOLLYWOOD FL          | <input type="checkbox"/> Delete            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | ST<br>MENEGAZZO, DORIS<br>2236 JACKSON ST SUITE 6<br>HOLLYWOOD FL 33020 | <input type="checkbox"/> Delete            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | VP<br>BOYNTON, ASA<br>2236 JACKSON ST #10<br>HOLLYWOOD FL 33020         | <input checked="" type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                         | <input type="checkbox"/> Delete            |

|                                                |                                                                                   |                                                                              |
|------------------------------------------------|-----------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | PRESIDENT<br>CUMMINS, AIDAN<br>2236 JACKSON ST - #7<br>HOLLYWOOD, FL 33020        | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | ST-PRESIDENT<br>AUCLAIR, CHRISTINE<br>2236 JACKSON ST - #4<br>HOLLYWOOD, FL 33020 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>BERTHOLD, HEINZ<br>2236 JACKSON ST #3<br>HOLLYWOOD, FL 33020                 | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | DIRECTOR<br>MENEGAZZO, DORIS<br>2236 JACKSON ST. #6<br>HOLLYWOOD, FL 33020        | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | VP<br>CLARK, JAMES<br>2236 JACKSON ST - #8<br>HOLLYWOOD, FL 33020                 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                   | <input type="checkbox"/> Change <input type="checkbox"/> 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.

SIGNATURE:

*Christine Auclair* Sec. tres. CHRISTINE AUCLAIR April 27, 2002

CR2E037 (9/01)