

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 23, 2002 8:00 am**  
**Secretary of State**

04-23-2002 90373 042 \*\*\*\*61.25

**DOCUMENT # 721130**

1. Entity Name

**THE LANDS OF THE PRESIDENT CONDOMINIUM ONE, INC.**

Principal Place of Business

Mailing Address

~~3900 WOODLAKE BLVD., SUITE 201~~  
~~LAKE WORTH FL 33463~~

FRANK LICATA  
 1801 PRESIDENTIAL WAY, D204  
 WEST PALM BEACH

1701 to 1901 Presidential way  
 WPB, FL 33461

2. Principal Place of Business

3. Mailing Address

1701 to 1901 Presidential way

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

WPB, FL

4. FEI Number

59-1391375

Applied For

Not Applicable

Zip

Country

Zip

Country

33401

FL

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

LADWIG, PATTI H  
 12765 W. FOREST HILL BLVD., SUITE 1312  
 WELLINGTON FL 33414

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Delete  
 NAME LICATA, FRANK  
 STREET ADDRESS 1801 PRESIDENTIAL WAY, D204  
 CITY-ST-ZIP WEST PALM BEACH FL 33401

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

TITLE VPD ☐ Delete  
 NAME PICKARD, AL  
 STREET ADDRESS 1801 PRESIDENTIAL WAY, D203  
 CITY-ST-ZIP WEST PALM BEACH FL 33401

TITLE PD ☒ Change ☐ Addition  
 NAME PICKARD, AL  
 STREET ADDRESS 1801 PRESIDENTIAL WAY # D203  
 CITY-ST-ZIP WEST PALM BEACH, FL 33401

TITLE SD ☐ Delete  
 NAME COULE, MARINA  
 STREET ADDRESS 1705 PRESIDENTIAL WAY, B202  
 CITY-ST-ZIP WEST PALM BEACH FL 33401

TITLE VPD ☒ Change ☐ Addition  
 NAME COULE, MARINA  
 STREET ADDRESS 1705 PRESIDENTIAL WAY, # B202  
 CITY-ST-ZIP WEST PALM BEACH, FL 33401

TITLE TD ☐ Delete  
 NAME GUTTERCEZ, JOE  
 STREET ADDRESS 1731 PRESIDENTIAL WAY, C204  
 CITY-ST-ZIP WEST PALM BEACH FL 33401

TITLE TD ☒ Change ☐ Addition  
 NAME GUTIERREZ, JOE  
 STREET ADDRESS 1731 PRESIDENTIAL WAY # C204  
 CITY-ST-ZIP WEST PALM BEACH, FL 33401

TITLE D ☒ Delete  
 NAME COLLINS, MARLYN JR  
 STREET ADDRESS 1731 PRESIDENTIAL WAY, C202  
 CITY-ST-ZIP WEST PALM BEACH FL 33401

TITLE SD ☐ Change ☒ Addition  
 NAME CESARD, MARY  
 STREET ADDRESS 1801 PRESIDENTIAL WAY # D-204  
 CITY-ST-ZIP WEST PALM BEACH, FL 33401

TITLE ☐ Delete  
 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]*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/9/02

CR2E037 (9/01)