2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED DOCUMENT # 722814 Jan 28, 2000 8:00 am Secretary of State 1. Entity Name THE CLARIDGES CONDOMINIUM, INC. 01-28-2000 90171 019 ****61.25 Mailing Address Principal Place of Business 3460 SOUTH OCEAN BLVD. 3460 SOUTH OCEAN BLVD. PALM BEACH FL 33480 PALM BEACH FL 33480-5908 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State 59-1447197 Not Applicable \$8.75 Additional Country Zip Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Nama ESTO NE Street Address (P.O. Box Number is GILL. RALPH 3456 SOUTH OCEAN BOULEVARD 205 E PALM BEACH FL 33480 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. TRUSURER (NOTE: Registered Agent signature required when reinstating) d or printed name of registered agent and title if applicable Make Check Payable to **FILE NOW:** 9. Election Campaign Financing \$5.00 May Be Department of State Trust Fund Contribution. Added to Fees FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. Addition ☐ Delete TITLE TITLE NAME PANFEL, BERNARD R STREET ADDRESS STREET ADDRESS 6456 SOUTH OCEAN BLVD. CITY-ST-ZIE CITY-ST-ZIP PALM BEACH FL 33480 Change Addition Addition Delete TITLE TITLE NAME NAME HADGIGEORGE, STEVE STREET ADDRESS STREET ADDRESS 3460 SOUTH OCEAN BLVD. CITY_ST-7/P CITY-ST-ZIP PALM-BEACH FL 33480~ ☐ Change ☐ Addition TITLE ☐ Delete TITLE GROSS, IRENE NAME NAME STREET ADDRESS STREET ADDRESS 3460 SOUTH OCEAN BLVD. CITY-ST-7IP CITY-ST-ZIP PALM BEACH FL 33480 ☐ Change ☐ Addition Delete TITLE TITLE NAME ABRAMS, HAL STREET ADDRESS STREET ADDRESS 3460 SOUTH OCEAN BLVD. CITY-ST-ZIP CITY-ST-ZIP PALM BEACH FL 33480 ☐ Change Addition ☐ Delete TITLE FIRESTONE, JOHN MAME STREET ADDRESS STREET ADDRESS 3460 S OCEAN BLVD CITY-ST-ZIP CITY-ST-70 PALM BEACH FL 33480 ☐ Delete ☐ Change Addition TITLE RUBIN, PHIL NAME STREET ADDRESS STREET ADDRESS 3460 SOUTH OCEAN BLVD. CITY-ST-ZIP CITY-ST-ZIP PALM BEACH FL 33480 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 accourate 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.