

FILED
Sep 06, 2001 8:00 am
Secretary of State

08-01-2001 90010 021 ****61.25

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 723377

1. Entity Name

THE TUDOR II SOUTH CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

340 ORANGE TREE DRIVE
 #4
 ATLANTIS FL 33462
 US

Mailing Address

340 ORANGE TREE DRIVE
 #4
 ATLANTIS FL 33462
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-1573419

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

FLACHBARTH, ROBERT K
 340 ORANGE TREE DR
 UNIT 2A
 ATLANTIS FL 33462

Name PAUL L. HOWARD

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

340 ORANGE TREE DR.

UNIT 1

City

ATLANTIS

FL

Zip Code

33462

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

Paul L. Howard
 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

7/14/01

FILE NOW: FEE IS \$61.25

After September 12, 2001, min. will be \$236.25

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
 NAME FLACHBARTH, ROBERT K
 STREET ADDRESS 340 ORANGE TREE DR, #2A
 CITY-ST-ZIP ATLANTIS FL 33462 ☐ Delete

TITLE VPD
 NAME HOWARD, PAUL
 STREET ADDRESS 340 ORANGE TREE DR #1
 CITY-ST-ZIP ATLANTIS FL 33462 ☐ Delete

TITLE S
 NAME MATTSON, GERALDINE
 STREET ADDRESS 340 ORANGE TREE DR #1A
 CITY-ST-ZIP ATLANTIS FL 33462 ☐ Delete

TITLE TD
 NAME ROWE, JEANNINE R
 STREET ADDRESS 340 ORANGE TREE DR #4
 CITY-ST-ZIP ATLANTIS FL 33462 ☐ Delete

TITLE D
 NAME MOLANARIO, RICHARD
 STREET ADDRESS 340 ORANGE TREE DR #3
 CITY-ST-ZIP ATLANTIS FL 33462 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

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

TITLE PRESIDENT & Director
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☒ Change ☐ Addition

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

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

TITLE V. PRESIDENT & Director
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☒ Change ☐ Addition

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.

SIGNATURE:

Paul L. Howard
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

07/14/01

Daytime Phone #

561-4324003

CR2E037 (5/01)