

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 28, 2001 8:00 am
Secretary of State
 02-28-2001 90109 039 *****61.25

A0026262

DO NOT WRITE IN THIS SPACE

DOCUMENT # 725081

1. Entity Name

Barcelona Condominium North ✓

Principal Place of Business

Mailing Address

2. Principal Place of Business

251 S. Cypress Rd

3. Mailing Address

10034 W. McNab Rd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

~~Pompano~~ Clubhouse office

Tamarac FL

City & State

City & State

Pompano Beach FL

Zip

Country

Zip

Country

33060

Broward

33321

Broward

4. FEI Number

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

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	TREASURER	☒ Delete
NAME	AMY VARNER	
STREET ADDRESS	259 S. Cypress Rd # 541	
CITY-ST-ZIP	Pompano Beach FL 33060	
TITLE	Jeff Haskett	☒ Delete
NAME	secretary	
STREET ADDRESS	257 S. Cypress Rd # 437	
CITY-ST-ZIP	Pompano Beach FL	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	Secretary	☒ Change ☐ Addition
NAME	Robt NOE	
STREET ADDRESS	257 S. Cypress Rd # 408	
CITY-ST-ZIP	Pompano Beach FL 33060	
TITLE	Treasurer	☐ Change ☒ Addition
NAME	Joe Vivinto	
STREET ADDRESS	259 S. Cypress Rd # 526	
CITY-ST-ZIP	Pompano Beach FL 33060	
TITLE	Director	☐ Change ☒ Addition
NAME	Bonnie Hatt	
STREET ADDRESS	251 S. Cypress Rd	
CITY-ST-ZIP	Pompano Beach FL 33060	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

President

2/9/01

(954)

946 6127

CR2E037 (11/00)