2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 03, 2003 8:00 am
Secretary of State
02-03-2003 90088 009 ****61.25

DOCUMENT # 725141

1. Entity Name
COCONUT GROVE APARTMENT CONDOMINIUM ASSOCIATION INC

Principal Place of Business	Mailing Address
12079 S.W. 131 AVENUE MIAMI FL 33186	12079 S.W. 131 AVENUE MIAMI FL 33186

00010043

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-1888623** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BECKER & POLIAKOFF - ROSA DE LA CAMARA
5201 BLUE LAGOON DRIVE
SUITE 100
MIAMI FL 33126

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. I am familiar with, and accept the obligations of registered agent.

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 Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	☐ Delete	TITLE	VP/D	☐ Change ☒ Addition
NAME	AZERLI, BEN		NAME	TAPIA, SUSANNA	
STREET ADDRESS	2666 TIGERTAIL AVE., UNIT 207		STREET ADDRESS	2666 TIGERTAIL AVE. UNIT 212	
CITY-ST-ZIP	COCONUT GROVE FL		CITY-ST-ZIP	COCONUT GROVE, FL	
TITLE	V	☐ Delete	TITLE	S/D	☐ Change ☒ Addition
NAME	KINDLE, PAM		NAME	McLEAN, ED	
STREET ADDRESS	2666 TIGERTAIL AVE., UNIT 105		STREET ADDRESS	2666 TIGERTAIL AVE, UNIT 108	
CITY-ST-ZIP	COCONUT GROVE FL		CITY-ST-ZIP	COCONUT GROVE, FL	
TITLE	TD	☒ Delete	TITLE		☐ Change ☐ Addition
NAME	FIORE, JOHN		NAME		
STREET ADDRESS	2666 TIGERTAIL AVE., UNIT 214		STREET ADDRESS		
CITY-ST-ZIP	COCONUT GROVE FL		CITY-ST-ZIP		
TITLE	SD	☒ Delete	TITLE		☐ Change ☐ Addition
NAME	CHAZEN, ELINOR		NAME		
STREET ADDRESS	2666 TIGERTAIL AVE., UNIT 112		STREET ADDRESS		
CITY-ST-ZIP	COCONUT GROVE FL		CITY-ST-ZIP		
TITLE	DD	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	KRATIVITZ, BOB		NAME		
STREET ADDRESS	2666 TIGERTAIL AVE., UNIT 206		STREET ADDRESS		
CITY-ST-ZIP	COCONUT GROVE FL		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

CR2E037 (10/02)

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 REQUIRED 1/29/03