

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 20, 2002 8:00 am
Secretary of State

02-20-2002 90167 017 *****61.25

DOCUMENT # 725160

1. Entity Name

ALLINGTON TOWERS CONDOMINIUM NORTH INC

Principal Place of Business

Mailing Address

500 S. OCEAN DR.
 HOLLYWOD FL 33019-2363

1500 S. OCEAN DR.
 HOLLYWOD FL 33019-2363

2. Principal Place of Business

3. Mailing Address

SAME AS ABOVE

SAME AS ABOVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1459928

Applied For

Not Applicable

Zip

Country

USA

Zip

Country

BROWARD

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**KALLICHE, ANTHONY A ESQ
 BECKER & POLIAKOFF, P.A.
 5201 BLUE LAGOON DRIVE, SUITE #100
 MIAMI FL 33126**

Name

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

City

FL

Zip Code

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

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<p>VP <input checked="" type="checkbox"/> Delete ECKSTEIN, SEYMOUR STREET ADDRESS: 1500 S. OCEAN DRIVE, APT. 8P CITY-ST-ZIP: HOLLYWOOD FL 33019</p>	<p>VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition MARC YOUNG STREET ADDRESS: 1500 S. OCEAN DR. APT. 14D CITY-ST-ZIP: HOLLYWOOD, FL 33019</p>
<p>D <input checked="" type="checkbox"/> Delete KURTZ, CHARLES STREET ADDRESS: 1500 S. OCEAN DR. APT. 7F CITY-ST-ZIP: HOLLYWOOD FL 33019</p>	<p>TREA <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition DAVID CRANKS STREET ADDRESS: 1500 S. OCEAN DR. APT 15E CITY-ST-ZIP: HOLLYWOOD, FL 33019</p>
<p>PRESIDENT <input type="checkbox"/> Delete BURKE, JOHN STREET ADDRESS: 1500 S OCEAN DRIVE APT 14P CITY-ST-ZIP: HOLLYWOOD FL 33019</p>	<p>D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition HEROLD HARRISON STREET ADDRESS: 1500 S. OCEAN DR. APT. 10A CITY-ST-ZIP: HOLLYWOOD, FL 33019</p>
<p>T <input checked="" type="checkbox"/> Delete BRITTON, NINA STREET ADDRESS: 1500 S. OCEAN DRIVE, APT.8E CITY-ST-ZIP: HOLLYWOOD FL 33019</p>	<p>D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition LEN WILDER STREET ADDRESS: 1500 S. OCEAN DR. APT. 15C CITY-ST-ZIP: HOLLYWOOD, FL 33019</p>
<p>SECRETARY <input type="checkbox"/> Delete METZGER, NANCY STREET ADDRESS: 1500 S OCEAN DRIVE APT 10J CITY-ST-ZIP: HOLLYWOOD FL 33019</p>	<p><input type="checkbox"/> Change <input type="checkbox"/> Addition</p>
<p>D <input type="checkbox"/> Delete MILLER, GERALD STREET ADDRESS: 1500 S. OCEAN DRIVE APT 7C CITY-ST-ZIP: HOLLYWOOD FL 33019</p>	<p><input type="checkbox"/> Change <input type="checkbox"/> Addition</p>

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

JOHN BURKE PRES.

Date

Daytime Phone #

12/04/02 954-922-9205

CR2E037 (9/01)