**2000 UNIFORM BUSINESS REPORT (UBR)** 

## **DOCUMENT # 725873** Aug 14, 2000 8:00 am Secretary of State 1. Entity Name OAKLAND SHORES CONDOMINIUM #1, INC. 08-14-2000 90002 046 \*\*\*\*61.25 Principal Place of Business Mailing Address 3127 OAKLAND SHORES DRIVE 3127 OAKLAND SHORES DRIVE OAKLAND PARK FL 33309 OAKLAND PARK FL 33309 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-1549650 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) DATTALO, PHILLIP S 3129 OAKLAND SHORES DRIVE A-112 Zip Code City OAKLAND PARK FL 33309 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 9. Election Campaign Financing Make Check Payable to FILE NOW: FEE IS \$61.25 \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State After September 13, 2000 min. will be \$236.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Addition ☐ Change ☐ Delete TITLE TITLE WEAVER, NOEL S NAME NAME 3119 OAKLAND SHORES DRIVE C112 STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP OAKLAND PARK FL 33309 TD Delete TITLE XX Change ☐ Addition TITLE TD LONDON, JORDAN NAME NAME Dattalo, Phillip S STREET ADDRESS STREET ADDRESS 3111 OAKLAND SHORES DRIVE F102 3129 Oakland Shores Dr. CITY-ST-7IP OAKLAND PARK FL 33309 Dakland-Pk--F1-33309 ---Delete TITLE TITLE-THOMAS, FORD NAME NAME 3111 OAKLAND SHORES DRIVE F015 STREET ADDRESS Anne Foxworthy STREET ADDRESS 3125 Oakland Shores Dr City-St-78 City-St-7IF OAKLAND PARK FL 33309 Oakland Park, Fl. 33309 Change ☐ Defete TITLE TITLE GRADY, ROSLYN NAME NAME 3119 OAKLAND SHORES DRIVE C105 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP OAKLAND PARK FL 33309 Change Addition TITLE Detete TITLE MICHEL, FRED NAME NAME STREET ADDRESS 3100 N. COURSE DRIVE, BLDG H. APT. 206 STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP POMPANO BEACH FL 33069 ☐ Delete ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

SIGNATURE:

changed, or on an attachment with an address

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/8/00 9514-485-9800 Date / Daytime Phone #