2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 01, 2001 08:00 AM
Secretary of State

DOCUMENT # 726741

1. Entity Name
LAS OLAS MANOR ASSOCIATION INC

Principal Place of Business	Mailing Address
1212 S.E. 2ND COURT	1212 S.E. 2ND COURT
FT. LAUDERDALE FL 333013940	FT. LAUDERDALE FL 333013940

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

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1739458 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

FOSTER JULIE
1040 BAYVIEW DRIVE
STE 325
FORT LAUDERDALE FL
33304 US

7. Name and Address of New Registered Agent

Name
COPA RAFAEL
Street Address (P.O. Box Number is Not Acceptable)
1212 SE 2ND COURT
#203
City FORT LAUDERDALE FL Zip Code 33301

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 RAFAEL COPA 03/01/2001
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	D BALKCOM CHARLES 1212 SE 2ND CT. #301 FT. LAUDERDALE FL 33301	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BROWN ANNA MARIE 1280 SE 2ND CT. #2 FT. LAUDERDALE FL 33301	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD KANELL RICHARD 1212 SE 2ND CT. #105 FT. LAUDERDALE FL 33301	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD LONG CINDY 1212 SE 2ND CT. #101 FT. LAUDERDALE FL 33301	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD PUTELIS RANDY 1212 SE 2ND CT. #201 FT LAUDERDALE FL 33301	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T COPA RAFAEL 1212 SE 2ND CT. #203 FT LAUDERDALE FL 33301	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T RUSSO GAY 1212 SE 2ND CT. #404 FT LAUDERDALE FL 33301	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD TESTA ROSEMARIE 1212 SE 2ND CT. #304 FT LAUDERDALE FL 33301	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD COPA RAFAEL 1212 SE 2ND CT. #203 FT LAUDERDALE FL 33301	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (11/00)

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: Rafael Copa PD 03/01/2001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #