

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 726981

1. Entity Name

THE CORINTHIAN CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

938 INTRACOASTAL DRIVE
FT LAUDERDALE FL 33304

938 INTRACOASTAL DRIVE
FT LAUDERDALE FL 33304

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1596364

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

KINNEY, STANLEY H
938 INTRACOASTAL DRIVE
15K 14D
FT. LAUDERDALE FL 33304

Ralph C. Meola

Name

Meola, Ralph C

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

938 Intracoastal Dr 14C

City

FT. Laud

FL

Zip Code
33304

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 DVP
NAME SHUTRUMP, GEORGE
STREET ADDRESS 938 INTRACOASTAL DR
CITY-ST-ZIP FORT LAUDERDALE FL 33304

TITLE DVP
NAME Vice President
STREET ADDRESS William Waldman
CITY-ST-ZIP PH 1

TITLE D
NAME LYNE, JANICE
STREET ADDRESS 938 INTRACOASTAL DR., 17F
CITY-ST-ZIP FORT LAUDERDALE FL 33304

TITLE D
NAME Secretary
STREET ADDRESS Ralph C. Meola
CITY-ST-ZIP 14D

TITLE DBM
NAME BARUCH, MALYN C
STREET ADDRESS 938 INTRACOASTAL DR 12G
CITY-ST-ZIP FT LAUDERDALE FL 33304

TITLE D
NAME Treasurer
STREET ADDRESS JEFFREY DILLON
CITY-ST-ZIP

TITLE D
NAME UCKO, BERNARD
STREET ADDRESS 938 INTRACOASTAL DR 10B
CITY-ST-ZIP FT. LAUDERDALE FL 33304

TITLE T
NAME Board Member
STREET ADDRESS Theo Folz
CITY-ST-ZIP

TITLE DP
NAME President
STREET ADDRESS FREDERICKSON, KEITH
CITY-ST-ZIP 938 INTRACOASTAL DRIVE
FT. LAUDERDALE FL 33304

TITLE T
NAME Board member
STREET ADDRESS Jim Pappas
CITY-ST-ZIP

TITLE T
NAME Director
STREET ADDRESS HOGAN, JAMES
CITY-ST-ZIP 938 INTRACOASTAL DR 22F
FT LAUDERDALE FL 33304

TITLE T
NAME Stanley Kinney
STREET ADDRESS Board Member
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 supplementary 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 partner or limited partner 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 #

954-561-3839

FILED
Jun 02, 2002 8:00 am
Secretary of State

03-28-2002 90157 038 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (8/01)