

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 03, 2001 8:00 am
Secretary of State

02-03-2001 90285 025 ****61.25

DOCUMENT # 727119

1. Entity Name

MANORS TOWNHOUSE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

ON, INC. (THE)
4162 INVERRARY DRIVE
LAUDERHILL FL 33319

ON, INC. (THE)
4162 INVERRARY DRIVE
LAUDERHILL FL 33319

915520



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

23-7441076

Applied For

Not Applicable

Zip

Country

Zip

Country

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

CAMPBELL PROPERTY MGMT. & REAL ESTATE, INC
4162 INVERRARY DRIVE
LAUDERHILL FL 33319

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.

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	VP	<input type="checkbox"/> Delete
NAME	ISRAEL, DONAL	
STREET ADDRESS	4124 INVERRARY DR.	
CITY-ST-ZIP	LAUDERHILL FL 33319	
TITLE	D	<input type="checkbox"/> Delete
NAME	GIBBS, DEBRA	
STREET ADDRESS	4122 INVERRARY DR	
CITY-ST-ZIP	LAUDERHILL, FL 00000	
TITLE	D	<input type="checkbox"/> Delete
NAME	OKSNER, HARRY	
STREET ADDRESS	4082 INVERRARY DR.	
CITY-ST-ZIP	LAUDERHILL, FL 00000	
TITLE	P	<input type="checkbox"/> Delete
NAME	TRENK, SEYMOUR	
STREET ADDRESS	4126 INVERRARY DR.	
CITY-ST-ZIP	LAUDERHILL, FL 00000	
TITLE	T	<input type="checkbox"/> Delete
NAME	TACHER, AL	
STREET ADDRESS	4092 INVERRARY DR.	
CITY-ST-ZIP	LAUDERHILL, FL 00000	
TITLE	S	<input type="checkbox"/> Delete
NAME	LABECK, JACKIE	
STREET ADDRESS	4044 INVERRARY DR.	
CITY-ST-ZIP	LAUDERHILL FL	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
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 changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

(954)485-2115

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)