

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2001 8:00 am
Secretary of State

04-14-2001 90045 001 15,067.50

DOCUMENT # 728077

1. Entity Name

DURHAM "V" CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

C/O DURHAM V-609
 CENTRUY VILLAGE
 DEERFIELD BCH. FL 33442

C/O DURHAM V-609
 CENTRUY VILLAGE
 DEERFIELD BCH. FL 33442

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

59-1906044

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

Name

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

City

FL

Zip Code

**CONDOMINIUM OWNERS ORG. OF CVE., INC.
 3501 WEST DRIVE
 DEERFIELD BEACH FL 33442-2085**

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 NAME STREET ADDRESS CITY-ST-ZIP	PD HESS, SIDNEY DURHAM V-609 DEERFIELD BCH. FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV ROSEN, MANUEL DURHAM V 620 DEERFIELD BCH. FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT FRIEDMAN, RACHEL 603 DURHAM V DEERFIELD BEACH FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S AMORINI, MARY 604 DURHAM V DEERFIELD BEACH FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOURGEOIS, JOHN DURHAM V 618 DEERFIELD BEACH FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD & T BARIL, JEAN 617 DURHAM V DEERFIELD BEACH FL 33442	☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DUNKELMAN, ALBERT DURHAM V-606 DEERFIELD BCH. FL	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☒ Addition

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)