

# UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 728949

1. Entity Name

VALENCIA VILLAGE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

26 N. VALENCIA DR.  
DAVIE FL 33324

Mailing Address

% THE CONTINENTAL GROUP  
1067 SHOTGUN RD.  
SUNRISE FL 33351

2. Principal Place of Business

26 N. Valencia Dr

3. Mailing Address

2950 N. 28th

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

DAVIE FL

City & State

HOLLYWOOD FL

Zip

33324

Country

USA

Zip

33020

Country

USA

4. FEI Number

59-1614649

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

BAKALAR, SUSAN P P.A.  
2240 S.W. 70TH AVENUE  
SUITE D  
DAVIE FL 33317

7. Name and Address of New Registered Agent

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DP  
BERG, RODNEY  
50 MADRID LANE  
DAVIE FL 33324 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DVP  
CASTRO, TERESA  
51 MATADOR LANE  
DAVIE FL 33324 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DT  
HERMAN, ADAM  
51 MADRID LANE  
DAVIE FL 33324 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
COHEN, DOUG  
13 MADRID LANE  
DAVIE FL 33324 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DS  
GREENBAUM, MARCIA  
35 MADRID LANE  
DAVIE FL 33324 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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  
DS  
MARVIN RUBENSTEIN  
31 Seville Circle  
DAVIE, FL 33324 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
DANIEL FERREIRA  
25 CORTEZ WAY  
DAVIE, FL 33324 ☐ 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

01/10/01

Daytime Phone #

CR2E037 (10/00)