2002 UNIFORM BUS	INESS REPO	KI (ORF	K)					787	
DOCUMENT # 729278 1. Entity Name				FilED		88			
BERKSHIRE "B" CONDOMINIUM ASSOCIATION, INC.				ALGRETARY OF STATE					
Principal Place of Business Mailing Address				02 APR -3 AM 8: (			8:16		
BERKSHIRE B	BERKSHIRE B								
3040 DEERFIELD BEACH FL 33442	3040 DEERFIELD BEACH FL 33442	<del></del>							
US	US					IN CONTRACTOR		H	
2. Principal Place of Business	3. Mailing Address								
Suite, Apt. #, etc.	Suite, Apt. #, etc.				DO NOT WRIT	E IN THIS SPACE			
City & State	City & State			4. FEI Number         Applied For           59-1870183         Not Applicable					
Zip Country	Zip Country			5. Certificate of Status Desired See Required \$8.75 Additional Fee Required					
6. Name and Address of Current	Registered Agent	Name		7. Name and Add	iress of New R	egistered Agent			
SCHNEIDER, JACK			Street Address (P.O. Box Nahmin) (P.O. Box Nahmi						
CENTURY VILLAGE	-	<del>-04/12/0201058001</del>							
BERKSHIRE "B" 3040	City			**1 <u>506</u>	-	<b>⊯∗61.25</b> ip Code	<b>-</b>   ,		
DEERFIELD BEACH FL 33442				Locat or both in	the state of Ele	FL   <sup>2</sup>			
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)									
FILE NOW: FEE IS \$61.25	9. Election Cam Trust Fund Co	ontribution.	□ À	5.00 May Be dded to Fees	/* " D	ke Check Pay epartment of	State		
10. OFFICERS AND DI	RECTORS  Delete	11.		DITIONS/CHANG		<b>—</b>	-	ddition 2	
TITLE   D	Delete	NAME	BRO	WN, BAR	BARK	B *°		ا المستقد	
STREET ADDRESS 4027 BERKSHIRE: B 7 4 4027		STREET ADDRESS CITY-ST-ZIP	403	0 / 0 D	00001110	-1 22,44	2	2	
TITLE DEERFIELD BEACH(FL 33442°)	Delete	TITLE	170	RFIELD	/		hange A	ddition	
NAME BACHMAN; TOBA	A	NAME	BEN	ISON, M	AKIE	12	• (1		
STREET ADDRESS 1024 BERKSHIRE B CITY-ST-ZIP DEEDELE D REACH FL 33442		STREET ADDRESS CITY-ST-ZIP	1037	RFIELD	BEACH.	D 22	14/2-		
TITLE VD DEERFIELD BEACH FL 33442	□ Delete	TITLE	3 D		/		hange	ddition	
NAME DIGUARDIA, IGNATIOUS		NAME	Coof	ZER MA	RTH# SHIRE	В		-	
STREET ADDRESS 4035 BERKSHIRE B CITY-ST-ZIP DEERFIELD BEACH FL 33442		STREET ADDRESS  CITY-ST-ZIP	1000		27. 100	FL 334	112		
TITLE D	Delete	TITLE	P					ddition	
NAME PLASTRIK, ANITA	•	NAME	1/52	LMAN	HIRE B	2			
STREET ADDRESS 4040 BERKSHIRE B CITY-ST-ZIP DEERFIELD BEACH FL 33442	•	STREET ADDRESS CITY-ST-ZIP	100	DEVELO	- A	1.3344	12		
TITLE TD	☐ Delete	TITLE	5		CHUT; I		hange A	ddition	
NAME SCHNEIDER, JACK		NAME	BIA		5/1/0	- B	`	`	
STREET ADDRESS 3040 BERKSHIRE B CITY-ST-ZIP DEERFIELD BEACH FL 33442		STREET ADDRESS CITY-ST-ZIP	302	OFICIA	KSH/RI BEACL		3442	{	
TITLE PD	Delete	TITLE	X TO	- <u>                                      </u>	VVIII.	_		ddition	
NAME BROWN, BARBARA	~	NAME				M. J.			
STREET ADDRESS 4027 BERKSHIRE B CITY-ST-ZIP DEEREIE D REACH FL 33442		STREET ADDRESS CITY-ST-ZIP				Burly			
DEERFIELD BEACH FL 33442  12. I hereby certify that the information supplied with			tadia Casti	ion 110 07/3\/i) F	orida Statutas I		-	tion	

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.

IGNATURE:

| Comparison of 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 the comparison of the receiver or trustee empowered.