2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2002 8:00 am
Secretary of State
05-14-2002 90342 012 ****61.25

DOCUMENT # 729389

1. Entity Name
LIME BAY CONDOMINIUM, INC. NO. 2

Principal Place of Business	Mailing Address
9190 LIME BAY BLVD. TAMARAC FL 33321	9190 LIME BAY BLVD. TAMARAC FL 33321

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
10034 W McNab Rd Suite, Apt. #, etc.	10034 W McNab Rd Suite, Apt. #, etc.
City & State: TAMARAC, FL	City & State: TAMARAC, FL
Zip: 33321 Country:	Zip: 33321 Country:

4. FEI Number 59-1606110 ☐ 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
GLAZER, ERIC M 1920 EAST HALLANDALE BEACH BLVD. 8TH FLOOR HALLANDALE FL 33009	Name: James B. Miles Street Address (P.O. Box Number is Not Acceptable): Consolidated Community Management 10034 W McNab Rd City: TAMARAC FL Zip Code: 33321

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 _____ DATE 4/2/02
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 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	D LONDER, HELEN 9100 LIME BAY BLVD. TAMARAC FL	☒ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	BAROFSKY, GLADYS 10034 W McNab Rd TAMARAC, FL 33321	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD ARIONDO, RUTH 9150 LIME BAY BLVD TAMARAC FL 33321	☐ Delete	TITLE SD NAME STREET ADDRESS CITY-ST-ZIP	ARIONDO, Ruth 10034 W McNab Rd TAMARAC, FL 33321	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DAVIS, LEO 9100 LIME BAY BLVD TAMARAC FL	☐ Delete	TITLE TD NAME STREET ADDRESS CITY-ST-ZIP	DAVIS, LEO 10034 W McNab Rd TAMARAC, FL 33321	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD GOLDSMITH, NORMAN 9100 LIME BAY BLVD TAMARAC FL 33321	☐ Delete	TITLE VPD NAME STREET ADDRESS CITY-ST-ZIP	Goldsmith, Norman 10034 W McNab Rd Tamarac, FL 33321	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD RIOS, PETER 9150 LIME BAY BLVD TAMARAC FL 33321	☐ Delete	TITLE PD NAME STREET ADDRESS CITY-ST-ZIP	RIOS, Peter 10034 W McNab Rd Tamarac, FL 33321	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GOLDSMITH, NORMAN 9101 LIME BAY BLVD TAMARAC FL 33321	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

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: Leo Davis Leo Davis Treasurer 4/2/02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #