2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address

SIGNATURE:

with all other like empowered

FILED DOCUMENT # **729817** Mar 04, 2000 8:00 am 1. Entity Name **Secretary of State** SILVER PALM VILLAS CONDOMINIUM ASSOCIATION, INC. 03-04-2000 90010 005 ****61.25 Mailing Address Principal Place of Business 4161 SILVER PALM DRIVE 4161 SILVER PALM DRIVE VERO BEACH FL 32963-1371 vero Beach FL 32963 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-1537946 Not Applicable Country Country \$8.75 Additional Zip 5. Certificate of Status Desired **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) GARRIS, CHARLES E. 817 BEACHLAND BLVD VERO BEACH FL 32963 Zip Code City 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees **Department of State FEE IS \$61.25** OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. 10. ☐ Addition TITLE ☐ Change ☐ Delete TITLE SZYBILLO, DORIS NAME NAME STREET ADDRESS STREET ADDRESS 4159 SILVER PALM DR. CITY-ST-ZIP CITY-ST-ZIP vero BCH Fl. 32963 Delete TITLE TITLE PAUL KAISER NAME NAME BOYLE, JOSEPH POBOX 356 WELLS RIVER STREET ADDRESS STREET ADDRESS 2728 NORTHEAST 30TH STREET LIGHTHOUSE POINT FL CITY-ST-ZIP CITY-ST-ZIP ■ Addition TITLE PD ☐ Delete TITLE NAME NAME GIARRUSSO, MARIO STREET ADDRESS STREET ADDRESS 100 ADAMS AVENUE CITY-ST-ZIP CITY-ST-ZIF METHUEN MA 01844 Change Addition TITLE ☐ Delete TITLE NAME NAME AMES, ROBERT O. STREET ADDRESS STREET ADDRESS 4161 SILVER PALM DRIVE CITY-ST-ZIP vero BCH. <u>Fl</u> Change ☐ Addition TITLE ☐ Delete TITLE ST NAME NAME GIARUSSO, GARY STREET ADDRESS STREET ADDRESS P.O. BOX 404 CJTY-ST-ZIP CITY-ST-ZIP PELHAM NH 03076 ☐ Addition ☐ Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

561-231-9872