

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 14, 2000 8:00 am
Secretary of State

03-14-2000 90038 032 ****70.00

DOCUMENT # 730111

1. Entity Name

LA CANCHA CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

615 N.E. 12TH AVENUE
 FT. LAUDERDALE FL 33304

615 N.E. 12TH AVENUE
 FT. LAUDERDALE FL 33304-2863

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

59-1652032

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

LIGHT, HARRY J.
 615 NE 12TH AVE
 FT. LAUDERDALE FL 33304

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input type="checkbox"/> Delete
NAME	HOWELL, NANCY	
STREET ADDRESS	615 NE 12TH AVE	
CITY-ST-ZIP	FT LAUDERDALE, FL 00000	
TITLE	SDT	<input type="checkbox"/> Delete
NAME	LIGHT, HARRY	
STREET ADDRESS	615 NE 12TH AVE	
CITY-ST-ZIP	FT LAUDERDALE, FL 00000	
TITLE	DAS	<input type="checkbox"/> Delete
NAME	GRIFIN, NANCY	
STREET ADDRESS	615 12TH AVE	
CITY-ST-ZIP	FT LAUD, FL 00000	
TITLE	D	<input type="checkbox"/> Delete
NAME	GUERRERA, JOHN	
STREET ADDRESS	615 NE 12TH AVE	
CITY-ST-ZIP	FT LAUDERDALE FL 33304	
TITLE	PD	<input type="checkbox"/> Delete
NAME	SADER, ROBERT	
STREET ADDRESS	615 NE 12TH AVE	
CITY-ST-ZIP	FT LAUDERDALE FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	SIMON, JEROME	
STREET ADDRESS	615 NE 12 AVE	
CITY-ST-ZIP	FT. LAUDERDALE FL 33304	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS	
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TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
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 changed, or on an attachment with an address with all other like empowered.

SIGNATURE: *Harry J. Light* **REQUIRED**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mar. 9-00 - 954-763-7124
 Date Daytime Phone #

CRE037 (9/99)