

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**

**Feb 03, 2001 8:00 am**  
**Secretary of State**

02-03-2001 90012 004 \*\*\*\*61.25

**DOCUMENT # 735097**

1. Entity Name

**VILLAS OF SHERIDAN CONDOMINIUM ASSOCIATION, INC.**

Principal Place of Business

VILLAS OF SHERIDAN CLUB HOUSE  
HOLLYWOOD FL 33021  
US

Mailing Address

2530 N 38 AVE  
HOLLYWOOD FL 33021  
US

**913236**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

**2500 N. 39 ST**  
Suite, Apt. #, etc.

3. Mailing Address

**2530 N. 38 AVE.**  
Suite, Apt. #, etc.

City & State

**Hollywood, FLA.**

City & State

**Hollywood FL**

4. FEI Number

**59-1690491**

Applied For

Not Applicable

Zip

Country

**33021 BROWARD**

Zip

Country

**33021 BROWARD**

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**KATLITAN -**  
**MOLTOUS, STEVE**  
**2532 N 38 AVE**  
**HOLLYWOOD FL 33021**

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

*Evelyn Lance*

(NOTE: Registered Agent signature required when reinstating)

DATE

**2-1-01**

**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 **PD KATLITAN** ☐ Delete  
NAME **KOLTOUS, STEVE**  
STREET ADDRESS **2532 N 38 AVE**  
CITY-ST-ZIP **HOLLYWOOD FL**

TITLE **DV** ☐ Delete  
NAME **TAMKIN, STEVE**  
STREET ADDRESS **2542 N 38TH AVE**  
CITY-ST-ZIP **HOLLYWOOD FL**

TITLE **SD** ☒ Delete  
NAME **SHOOKET, JONATHAN**  
STREET ADDRESS **3915 SHERIDAN ST**  
CITY-ST-ZIP **HOLLYWOOD FL**

TITLE **DT** ☐ Delete  
NAME **LANCE, EVELYN**  
STREET ADDRESS **2530 N 38 AVE**  
CITY-ST-ZIP **HOLLYWOOD FL**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **STEVE KATLITAN** ☐ Change ☐ Addition  
NAME  
STREET ADDRESS **2532 N. 38 AVE.**  
CITY-ST-ZIP **HOLLYWOOD FL. 33021**

TITLE **TAMKIN STEVE** ☐ Change ☐ Addition  
NAME  
STREET ADDRESS **2542 N. 38 AVE**  
CITY-ST-ZIP **HOLLYWOOD FL. 33021**

TITLE **PAM PAVSNER** ☐ Change ☐ Addition  
NAME  
STREET ADDRESS **2528 N. 38 AVE.**  
CITY-ST-ZIP **HOLLYWOOD FL. 33021**

TITLE **Evelyn Lance** ☐ Change ☐ Addition  
NAME  
STREET ADDRESS **2530 N. 38 AVE**  
CITY-ST-ZIP **HOLLYWOOD FL. 33021**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ 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

*Evelyn Lance*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**2-1-01 954-964-1799**

CR2E037 (10/00)