

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 11, 2001 8:00 am
Secretary of State

05-11-2001 90077 012 ****61.25

DOCUMENT # 737310

1. Entity Name

BILTMORE II CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

600 BILTMORE WAY
 CORAL GABLES FL 33134

Mailing Address

600 BILTMORE WAY
 CORAL GABLES FL 33134

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1700590

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

BOWLING, J. W. JR.
600 BILTMORE WAY
CORAL GABLES FL 33134

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

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

TITLE **SD** Delete
 NAME **FRAZIER, HOMER JR**
 STREET ADDRESS **600 BILTMORE WAY**
 CITY-ST-ZIP **CORAL GABLES FL**

TITLE **VD** Delete
 NAME **VICSVICH, BARBARA**
 STREET ADDRESS **600 BILTMORE WAY**
 CITY-ST-ZIP **CORAL GABLES FL**

TITLE **D** Delete
 NAME **BAUER, PAUL**
 STREET ADDRESS **600 BILTMORE WAY**
 CITY-ST-ZIP **CORAL GABLES FL**

TITLE **D** Delete
 NAME **SMITH, FREDERICK**
 STREET ADDRESS **600 BILTMORE WAY**
 CITY-ST-ZIP **CORAL GABLES FL**

TITLE **TD** Delete
 NAME **OSMAN, LOIS**
 STREET ADDRESS **600 BILTMORE WAY**
 CITY-ST-ZIP **CORAL GABLES FL**

TITLE **PD** Delete
 NAME **DUBREUIL, GEORGE**
 STREET ADDRESS **600 BILTMORE WAY**
 CITY-ST-ZIP **CORAL GABLES FL**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME **D MILLER, DONALD**
 STREET ADDRESS **600 BILTMORE WAY**
 CITY-ST-ZIP **CORAL GABLES, FL**

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: *George Dubreuil*
GEORGE DUBREUIL, PRESIDENT
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-24-01

Date

Daytime Phone #

CR2E037 (10/00)