## 2002 UNIFORM BUSINESS REPORT (UBR)

## **FILED**

May 29, 2002 8:00 am Secretary of State

DOCUMENT # **737400** 04-17-2002 90080 043 \*\*\*\*61.25 GABRIEL TOWERS CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 0100 BOI N OCEAN BLVD. BOI N OCEAN BLVD. % OFFICE % OFFICE POMPANO BEACH FL 33062 POMPANO BEACH FL 33062 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 59-2066697 Not Applicable \$8.75 Additional Zip Country Zio Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) LAMON, RONALD 801 N OCEAN BLVD. #404 Zip Code City POMPANO BEACH FL 33082 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 little if applicable (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. TACK POLIZZOTTO TITLE ☐ Change Delete TITLE NAME 801 N. OCEN BLAD #703 NAME LAMON, RONALD STREET ADDRESS STREET ADDRESS 801 N OCEAN BLVD. # 404 33062 CITY-ST-ZIP CITY-ST-ZIP POMPANO BEACH FL 33062 Change TITLE VPD ☐ Delete TITLE FRANK TOMAN NAME NAME POWELL, JOAN 80 ( N. OCEMN BLUD # STREET ADDRESS STREET ADDRESS 801 N OCEAN BLVD.# 502 K FLA 3306L DONPANU BEAL CITY-ST-ZIP CITY-ST-ZIP POMPAN BEACH FL 33062 Change S Delete TITLE TITLE NAME -NAME GOLDENBERG, SUE STREET ADDRESS STREET ADDRESS 801 N OCEAN BLVD. PH-2 CITY-ST-ZIP CITY-ST-ZP POMPANO BEACH FL 33062 ☐ Addition **Delete** TITLE TITLE NAME NAME HELD. JEANNE STREET ADDRESS STREET ADDRESS 801 N OCEAN BLVD, PH-1 CITY-ST-ZIP CITY-ST-ZIP POMPANO BEACH FL 3306 Change ■ Addition Delete TITLE TITLE NAME DIOGO, MARTHA NAME: STREET ADDRESS STREET ADDRESS 801 N OCEAN BLVD. # 601 CITY-ST-ZIP CITY-ST-ZIP POMPANO BEACH FL 33062 Addition ☐ Change ☐ Delete TIRE TITLE NAME NAME STREET ADDRESS 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: