

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 737793

1. Entity Name

SPRINGBROOK GARDENS, INC., A CONDOMINIUM

Principal Place of Business

Mailing Address

125 N. BIRCH RD. #404  
FT LAUDERDALE FL 33304  
US

C/O W. A. HALLMAN  
816 W. SHORE DR.  
BRIGANTINE NJ 08203-2625  
US

2. Principal Place of Business

125 N BIRCH RD

3. Mailing Address

6 MARIL LAMBERT

Suite, Apt. #, etc.

Suite, Apt. #, etc.

125 N. BIRCH RD #100

City & State

FT. LAUDERDALE, FL

City & State

FT LAUDERDALE FL 33304

Zip

33304

Country

US

Zip

33304

Country

US

4. FEI Number

59-1809263

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

HALLMAN, WILLIAM A.  
125 N. BIRCH RD. #404  
FT. LAUDERDALE FL 33304

7. Name and Address of New Registered Agent

Name

MARIL LAMBERT

Street Address (P.O. Box Number is Not Acceptable)

125 N. BIRCH RD #100

City

FT. LAUDERDALE

FL

Zip Code

33304

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 D ☐ Delete  
NAME JONES, GEORGE  
STREET ADDRESS 125 N. BIRCH ROAD #203  
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE D ☒ Delete  
NAME HALLMAN, WILLIAM A.  
STREET ADDRESS 125 N BIRCH RD #404  
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE D ☐ Delete  
NAME SOMERVILLE, PAT  
STREET ADDRESS 125 N BIRCH RD. #304  
CITY-ST-ZIP FT LAUDERDALE FL

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 DT ☐ Change ☒ Addition  
NAME MARK LAMBERT  
STREET ADDRESS 125 N. BIRCH RD #100  
CITY-ST-ZIP FT. LAUDERDALE FL 33304

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

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

TITLE ☐ Change ☐ Addition  
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TITLE ☐ Change ☐ Addition  
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

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

02-14-2000 90024 035 \*\*\*\*61.25



DO NOT WRITE IN THIS SPACE

2-8-00 954-764-7144