2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

739045 FILED SECRETARY OF STATE DOCUMENT # 739045 1. Entity Name DIVISION OF CORPORATIONS NEWPORT "V" CONDOMINIUM ASSOCIATION. INC. 03 APR 18 PM 2: 40 Principal Place of Business Mailing Address CONDOMINIUM OWNERS ORGANIZATION Deerfield Bob., FL 3344 Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number 59-1928464 Applied For Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CONDOMINIUM OWNERS ORGANIZATION Street Address (P.O. Box Number is Not Acceptable) 3501 WEST DRIVE DEERFIELD BEACH FL 33442-2085 City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. Delete TITLE Change ☐ Addition TITLE CHESTER, JEFFREY NAME NAME 329 NEWPORT V STREET ADDRESS STREET ADDRESS DEERFIELD BEACH FL 33442 CITY-ST-70 CITY-ST-ZIP ☐ Change ■ Addition TITLE Delete TITLE TRINCHITELLA, ROMEO NAME NAME NEWPORT "V" #324 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DEERFIELD BEACH FL 33442 CITY-ST-ZIP TITLE ☐ Celete TITLE ☐ Change ☐ Addition DELLINGER, BILL NAME NAME 313 NEWPORT V STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DEERFIELD BEACH FL 33442 Addition ☐ Change TITLE Delete TITLE KOPELS, PETER 335 NEW PORT V DAQUINO, THERESA NAME NAME STREET ADDRESS 331 NEWPORT V STREET ADDRESS DEERFIELD BENCH, FL 33442 CITY-ST-ZIP DEERFIELD BEACH FL 33442 CITY-ST-ZIP TITLE ☐ Deleta MIE ☐ Addition

12. I hereby certify that the information supplied with this filling 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 suppliemental 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.

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NAME

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NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

NAME

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP TITLE

PARNES, BARBARA

DEERFIELD BEACH FL 33442

DEERFIELD BEACH FL 33442

325 NEWPORT V

MOZNY, RUDY

319 NEWPORT V

SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

☐ Delete

Change

☐ Addition

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