

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 740820

1. Entity Name

TILFORD "W" CONDOMINIUM ASSOCIATION, INC. ✓

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 APR -3 PM 1:52



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

784 S. MILITARY TRAIL
DEERFIELD BEACH FL 33442

TILFORD W 485
DEERFIELD BEACH FL 33442
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

TILFORD W 491

TILFORD W 491

City & State

City & State

DEERFIELD BEACH, FL

DEERFIELD BEACH, FL

Zip

Country

Zip

Country

33442

USA

33442

USA

4. FEI Number

59-1984787

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BERLINER, JULIUS L.
TILFORD W 485
DEERFIELD BEACH FL 33442

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GIANNONE, VINCENT TILFORD W 496 DEERFIELD BEACH FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST LEVINE, RAE TILFORD W 486 DEERFIELD BEACH FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROSENTHAL, PAUL TILFORD W 495 DEERFIELD BEACH FL 33442	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FOLICKMAN, ABRAHAM TILFORD W 491 DEERFIELD BEACH FL 33442	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARINGIONE, GERALD TILFORD W 505 DEERFIELD BEACH FL 33442	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
	600005257606--7 -04/12/02--01058--001 **15067.50 *****61.25	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCKENNA, GERALD TILFORD W 497 DEERFIELD BEACH, FL 33442	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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 IRO empowered.

SIGNATURE:

RAE B. LEVINE 1/21/02 (954) 570-8448

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)