

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 17, 2000 8:00 am**  
**Secretary of State**

05-17-2000 90844 027 \*\*\*\*61.25

**DOCUMENT # 741320**

1. Entity Name

**CAMINO SHERIDAN VILLAS HOMEOWNERS ASSOCIATION, I**

Principal Place of Business

Mailing Address

~~C/O SID RADELOFF~~  
~~2416 N 37TH AVE~~  
~~HOLLYWOOD FL 33021~~

~~C/O SID RADELOFF~~  
~~2416 N 37TH AVE~~  
~~HOLLYWOOD FL 33021 3605~~  
~~XXXXXXXXXX~~

2. Principal Place of Business

3. Mailing Address

**c/o Rich Zitani**

**c/o Rich Zitani**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**2405 N. 37th Avenue**

**2405 N. 37th Avenue**

City & State

City & State

**Hollywood, FL**

**Hollywood, FL**

Zip

Country

Zip

Country

**33021**

**33021**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**RADELOFF, SID**  
**2416 N 37TH AVE**  
**HOLLYWOOD FL 33021**

Name

**Richard Zitani**

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

**2405 N. 37th Avenue**

City

**Hollywood**

**FL**

Zip Code

**33021**

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

**4-28-00**

**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 ☐ Delete  
 NAME **VD**  
 STREET ADDRESS **MARGOLIS, LORRAINE**  
 CITY-ST-ZIP **2325 N. 37TH AVENUE**  
**HOLLYWOOD FL**

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

TITLE ☐ Delete  
 NAME **SD**  
 STREET ADDRESS **SELVIN, FRAN**  
 CITY-ST-ZIP **2463 N 37TH AVE**  
**HOLLYWOOD FL 00000**

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

TITLE ☐ Delete  
 NAME **RD**  
 STREET ADDRESS **RADELOFF, SID**  
 CITY-ST-ZIP **2416 N 37TH AVE**  
**HOLLYWOOD FL**

TITLE ☒ Change ☐ Addition  
 NAME **D**  
 STREET ADDRESS **7830 Exeter Blvd. East**  
 CITY-ST-ZIP **Tamarac, FL 33321**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☒ Addition  
 NAME **P D**  
 STREET ADDRESS **Richard Zitani**  
 CITY-ST-ZIP **2405 North 37th Avenue**  
**Hollywood, FL 33021**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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

TITLE ☐ Delete  
 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:

**SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

Date

Daytime Phone #

**4-28-00**

CR2E037 (9/99)