FILED 2002 UNIFORM BUSINESS REPORT (UBR) Apr 16, 2002 8:00 am Secretary of State DOCUMENT # **742469** 1. Entity Name 04-16-2002 90025 036 ****61 SPARROWS WALK CONDOMINIUM ASSOCIATION, INC. Mailing Address Principal Place of Business C/O BENCHMARK PROPERTY MANAGEMENT C/O BENCHMARK PROPERTY MANAGEMENT 7932 WILES ROAD 7932 WILES ROAD CORAL SPRINGS FL 33065 CORAL SPRINGS FL 33065 2. Principal Place of Business 3. Mailing Address Suite, Apt. \#, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2087992 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) **KAYE & ROGER PA** 6261 NW 6 WAY FORT LAUDERDALE FL 33309 City Zip Code FL 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) 9. Election Campaign Financing Make Check Payable to \$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 10. 11. (10/6) ☐ Addition TITLE PD ☐ Delete TITLE Director-Sec NAME NAME Duval, Vicki 3100 Fiverside Drive #304 DUVAL, VICKI STREET ADDRESS STREET ADDRESS 3100 RIVERSIDE DR #304 CITY-ST-ZIP CITY-ST-ZIP CORAL SPRINGS FL 33065 Coral Springs, FL 33065 Addition **VPD** Delete TITLE Director-VP Change TITLE. NAME NAME MCDONALD, EARL McDonald, Margaret STREET ADDRESS STREET ADDRESS 3100 RIVERSIDE DR #212 3100 Riverside Drive #212 CITY-ST-ZIP CITY-ST-ZIP CORAL SPRINGS FL 33065 Coral Springs, FL 33065 Delete TITLE Director-President ☐ Change Addition TITLE NAME King, Prian 3100 Riverside Drive NAME MCCANDREWS, JOAN #307 STREET ADDRESS STREET ADDRESS 3100 RIVERSIDE DR #307 CITY-ST-ZIP CITY-ST-ZIP **CORAL SPRINGS FL 33065** <u> Coral Springs, FL 33065</u> ☐ Change Addition DS TITLE TITLE Delete Director-Treas NAME NAME KING, JESSICA Darnell, Justin 3100 Riverside Drive STREET ADDRESS STREET ADDRESS #302 3100 RIVERSIDE DR #301 CITY-ST-ZIP CITY-ST-7IP CORAL SPRINGS FL 33065 Coral Springs, FL 33065 ____ Change Addition Delete TITLE TITLE Director NAME NAME WOLFE, BETTY Demming, Linda STREET ADDRESS STREET ADDRESS 3100 Riversde Drive #107 Coral Springs, FL 33065 3100 RIVERSIDE DR #111

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 attacking nt with an address, with all other like empowered.

CITY-ST-ZIP

NAME ---

STREET ADDRESS CITY-ST-ZIP

TITLE

SIGNATURE:

CORAL SPRINGS FL 33065

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME

Toreasure

Delete

3-28-02

954-346-8322

□ Change

☐ Addition