

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 742768

1. Entity Name

KENT G CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business
98 KENT G
WEST PALM BEACH FL 33417
US

Mailing Address
98 KENT G
WEST PALM BEACH FL 33417-1713
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-1650830

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

WAXMAN, SAMUEL S
98 KENT G
W. PALM BCH FL 33417

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

TITLE PT
NAME STREIM, ETHEL
STREET ADDRESS 107 KENT G
CITY-ST-ZIP WEST PALM BEACH FL 33417 ☐ Delete

TITLE TD
NAME WAXMAN, SAMUEL S
STREET ADDRESS 98 KENT G
CITY-ST-ZIP WEST PALM BEACH FL 33417 ☐ Delete

TITLE SD
NAME PUTZ, GISELLE
STREET ADDRESS 106 KENT G
CITY-ST-ZIP WEST PALM BEACH FL 33417 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PRESIDENT
NAME GIACOMO DEROA
STREET ADDRESS 109 KENT G
CITY-ST-ZIP WEST PALM BEACH, FLORIDA 33417 ☐ Change ☒

TITLE VICE PRESIDENT
NAME ETHEL STREIM
STREET ADDRESS 107 KENT G
CITY-ST-ZIP WEST PALM BEACH FLORIDA 33417 ☐ Change ☐

TITLE TREASURER
NAME SAMUEL S. WAXMAN
STREET ADDRESS 98 KENT G
CITY-ST-ZIP WEST PALM BEACH FLORIDA 33417 ☐ Change ☐

TITLE SECRETARY
NAME GISELLE PUTZ
STREET ADDRESS 106 KENT G
CITY-ST-ZIP WEST PALM BEACH FLORIDA 33417 ☐ Change ☐

TITLE DIRECTOR AT LARGE
NAME HOWARD SACHNOFF
STREET ADDRESS 100 KENT G
CITY-ST-ZIP WEST PALM BEACH FLORIDA 33417 ☐ Change ☐

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

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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #