## **2002 UNIFORM BUSINESS REPORT (UBR)**

## Feb 12, 2002 8:00 am DOCUMENT # **742806 Secretary of State** 1. Entity Name 02-12-2002 90108 036 \*\*\*\*61.25 WINDSOR D CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 66 WINDSOR D 66 WINDSOR D CENTURY: VILLAGE CENTURY VILLAGE WEST PALM BEACH FL 33417 WEST PALM BEACH FL 33417 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-2182690 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) BERNSTEIN, DAVID 66 WINDSOR D WEST PALM BEACH FL 33417 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. (9/01) TITLE ☐ Delete TITLE ☐ Addition NAME BERNSTEIN, DAVID NAME STREET ADDRESS CR2E037 66 WINDSOR D STREET ADDRESS CITY-ST-7IP WEST PALM BEACH FL 33417 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition HALBERSTADT, GERTRUDE NAME NAME STREET ADDRESS 79 WINDSOR D STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP <u>West Palm Beach Fl</u> SD elete Addition TITLE - Change TITLE TARLOY LOIS 88 WINDSOR D NAME GEVERCER, SHIRLEY NAME STREET ADDRESS STREET ADDRESS 80 WINDSOR D WESTPALM BEACH, FL. 33417 CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33417 **X** Delete TD **X** Addition TITLE GEVERCER, HARRY BOWINDSORD ABBOTT, DAVID NAME NAME STREET ADDRESS 65 WINDSOR D STREET ADDRESS WEST PALM BEACH, FL. 33417 CITY-ST-ZIP CITY-ST-ZIP west palm beach fl TITLE ☐ Defete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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:** 

1/26/02 56

**FILED**