FILED
Aug 08, 2003 8:00 am
Secretary of State
07-16-2003 90047 026 ****61.25

FROM : PARKER TOWER FAX NO. : 9544574907

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

7/16/20

DOCUMENT # 746207

1. Entity Name
PARKER TOWER CONDOMINIUM ASSOCIATION, INC.

55053640

Principal Place of Business	Mailing Address
3140 SOUTH OCEAN DRIVE HALLANDALE FL 33009	3140 SOUTH OCEAN DRIVE HALLANDALE FL 33009

[redacted]

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 65-1920087 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HEIN, STEVEN A PA
900 SOUTH STATE RD 7
PLANTATION FL 33317

7. Name and Address of New Registered Agent

Name: Steven A. Wagner
Street Address (P.O. Box Number is Not Acceptable): 3375 W. Hillsboro Blvd.
Suite 205
City: Deerfield Beach FL Zip Code: 33442

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. I am familiar with, and accept, the obligations of registered agent.

SIGNATURE [signature] 8/4/03
Signature, typed or printed name of registered agent and title if applicable. — Date

FILE NOW: FEE IS $61.25
After September 16, 2003, a fee will be $XXX.25

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE: T NAME: CABALLERO, JOHN STREET ADDRESS: 3140 S OCEAN DR #305 CITY-ST-ZIP: HALLANDALE FL 33009	☐ Delete		TITLE: President NAME: Seidman Myer STREET ADDRESS: 3140 S. Ocean DR. #804 CITY-ST-ZIP: Hallandale, Fl. 33009	☒ Change ☐ Addition
TITLE: V NAME: DE LA CUESTA, KATHY STREET ADDRESS: 3140 S OCEAN DR. #[illegible] 805 CITY-ST-ZIP: HALLANDALE FL 33009	☐ Delete		TITLE: Vice-President NAME: Kirowitz Elaine STREET ADDRESS: 3140 S. Ocean DR. #1601 CITY-ST-ZIP: Hallandale, Fl. 33009	☒ Change ☐ Addition
TITLE: S NAME: KIROWITZ, ELAINE STREET ADDRESS: 3140 S OCEAN DR #1601 CITY-ST-ZIP: HALLANDALE FL 33009	☐ Delete		TITLE: Treasurer NAME: De la Cuesta, Kathy STREET ADDRESS: 3140 S. Ocean DR. #805 CITY-ST-ZIP: Hallandale, Fl 33009	☐ Change ☐ Addition
TITLE: D NAME: SEIDMAN, MYER STREET ADDRESS: 3140 S OCEAN DR. #804 CITY-ST-ZIP: HALLANDALE FL 33009	☐ Delete		TITLE: Secretary NAME: Bahan Selma STREET ADDRESS: 3140 S. Ocean DR. #404 CITY-ST-ZIP: Hallandale, Fl. 33009	☒ Change ☐ Addition
TITLE: D NAME: GARDNER, ESTELLE STREET ADDRESS: 3140 S OCEAN DR. #1605 CITY-ST-ZIP: HALLANDALE FL 33009	☒ Delete		TITLE: Director NAME: Kibner Murray STREET ADDRESS: 3140 S. Ocean DR #1204 CITY-ST-ZIP: Hallandale, Fl. 33009	☐ Change ☒ Addition
TITLE: D NAME: WOLPOWITZ, LILLY STREET ADDRESS: 3140 S OCEAN DR. #[illegible] 704 CITY-ST-ZIP: HALLANDALE FL 33009	☒ Delete		TITLE: Director NAME: Cobbs Richard STREET ADDRESS: 3140 S. Ocean DR. #2210 CITY-ST-ZIP: Hallandale, Fl. 33009	☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(i)(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] V.P. 7/23/03
Signature and typed or printed name of signing officer or director — Date — Daytime Phone #

Aug-04-03 11:44A P.02