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

DOCU  1. Entity Nan	D3 NOT-FOR-PROFINES INFORM BUSINES IMENT # 745867  DY I ASSOCIATION, INC.			1	Ma So	FILl ny 16, 20 ecretary 05-16-2003 90179	03 8:00 of Stat	o am 🖁 te
PRIME MANAGEMENT GROUP. INC. PRIME 6300 PRK OF COMMERCE BLVD 6300 PBOCA RATON FL 33487 BOCA US		3300 PRK OF COMMERCE BOCA RATON FL 33487 JS	E MANAGEMENT GROUP. INC. PRK OF COMMERCE BLVD A RATON FL 33487					
2. Principal Place of Business 3. Ma		Mailing Address				<b>()</b>		
Suite, Apt. #, etc. S		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES			
City & State		City & State			4. FEI Number 59-1920759 Applied For Not Applicable			
Zip	Country	Zip	Country		5. Certificate of St	atus Desired	\$8.75 Addition	
	6. Name and Address of Current Reg	istered Agent			7. Name and Ado	iress of New Register		
			Name	ougla	z Gray			
APARTMI	T. BURGUNDÝ I		Street A	ddress (	P.O. Box Number is	Not Acceptable)	31~1	
JELINI	ELOTT L SOTOT		Boo	o P	aton		Zip Code	,
SIGNATURE	Signature, typed or printed name of registered agence of the FILE NOW: FEE IS \$61.25	9. Election Can	:: Registered Gent signat		\$5.00 May Be		eck Payable to	
		Trust Fund C	ontribution.	<u></u>	Added to Fees	Florida Der	partment of Sta	ate
10.	OFFICERS AND DIREC		11.	VP	ADDITIONS/CHANG	ES TO OFFICERS AND		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PULIK, HARRY 388 BURGUNDY I DELRAY BEACH FL 33484	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		eline Ru	omoff Rosen	Pthange [ berg	Unoilippy (10/02)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DINOWITZ, JOSEPH 411 BURGUNDY I DELRAY BEACH FL	Delete	TITLE NAME STREET ADDRESS CITY_ST_7IP	Trei Tor 418	en Kaya Burgundy	n エ hFL 334	☐ Change [	Addition S
TITLE	P	☐ Delete	TITLE	DiR	ter Klein	Lic. ( T	☐ Change [	Addition
NAME STREET ADDRESS	HAHN, LUCILLE 410 BURGUNDY I		STREET ADDRESS	420	Burgundy	, I , I=L 3346 05/64	,,	l
CITY-ST-ZIP	DELRAY BEACH FL		CITY-ST-ZIP	Del R	my Beach	1-6 3348	Change [	14400
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MOLSKY, JACK 422 BURGUNDY I DELRAY BEACH FL 33484	<b>□</b> Velete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	JAC	K ABOL	osky	[ <b>"F</b> ⊂nange [	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD ROMOFF, MADELINE 391 BURGUNDY 1 DELRAY BEACH FL 33484	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			100-100	☐ Change [	Addition
TITLE NAME	S DIAMOND, DORA	☐ Delete	TITLE NAME				☐ Change [	Addition

12. I hereby certify that the information supplied with this filling 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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

424 BURGUNDY I

**DELRAY BEACH FL** 

SIGNATURE REQUIRED