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**FILED** 

305)861-1369

## 2002 UNIFORM BUSINESS REPORT (UBR)

## May 24, 2002 8:00 am Secretary of State **DOCUMENT # 747070** 1. Entity Name 04-01-2002 90616 025 \*\*\*\*61.25 CLUB OF BAY HARBOR CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 1120 99 STREET 1120 99 STREET BAY HARBOR ISLAND FL 33154 BAY HARBOR ISLAND FL 33154 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1948743 Not Applicable Zip Country Zin Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name - NEITERMAN, BERTRAM Street Address (P.O: Box Number is Not Acceptable) --1120 99TH ST **#502** BAY HARBOR ISLANDS FL 33154 City Zip Code a. 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 (NOTE: Registered Agent algoriture required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Make Check Payable to Trust Fund Contribution Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE ☐ Change Addition NAME NEITERMAN, BERTRAM NAME STREET ADDRESS 1120 99TH ST, #502 STREET ADDRESS CITY-ST-ZIP BAY HRBR ISLANDS FL 33154 CITY-ST-ZIP ☐ Defete TITLE TD Change ☐ Addition TORRES, CARLOS NAME NAME STREET ADDRESS 1120 99TH ST, #402 STREET ADDRESS CITY-ST-ZIP BAY HARBOR ISLANDS FL 33154 CITY-ST-ZIP TIDE Deleta MLE ☐ Change ☐ Addition RODRIGUEZ, BERTHA NAME NAME 1120 99TH ST, #304 STREET ADDRESS STREET ADDRESS ับเหารัก BAY HRBR ISLANDS FL 33154 City: St-71P TITLE ☐ Delete TITLE ☐ Change Addition STEPHANY FISHER NAME NAME 99 Th ST., #504 STREET ADDRESS 1120 STREET ADDRESS CITY-ST-7IP HARBOR IS., FL 33154 вау CfTY-ST-ZIP TITLE Delete TITLE ☐ Change Addition M. SOTO NAME ANA NAME # 205 STREET ADDRESS 99Th ST. STREET ADDRESS 1120 CITY-ST-ZIP CITY-ST-ZIP FL 33154 HARBOR: II BAY TITLE Delete D. NAME NAME YANCY RANALL STREET ADDRESS #206 STREET ADDRESS 99 Th ST. 1120 CITY-ST-7IP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3Xi), 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 the proposer 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 the proposer of the corporation of the corporation of the corporation of 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 the proposer of the corporation of the corporation of the corporation of 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 the proposer of the corporation of the corporation of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 617. Florida Statutes are the corporation of the cor SIGNATURE: