FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Apr 24, 2001 8:00 am Secretary of State **DOCUMENT # 747254** 1. Entity Name CORAL RIDGE EAST CONDOMINIUM ASSOCIATION, INC. 04-24-2001 90015 049 ****61.25 Principal Place of Business Mailing Address 4501 NE 21ST AVENUE 4501 NE 21ST AVENUE FT. LAUDERDALE FL 33307-4740 FT. LAUDERDALE FL 33307-4740 643651 2. Principal Place of Business 3. Mailing Address Suite Ant. #. etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number City & State City & State Applied For 59-2000415 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) ROYAL PROPERTY MANAGT INC 8317 W ATLANTIC BLVD CORAL SPRINGS FL 33071 Zip Code FL 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) FILE NOW: 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Department of State FEE IS \$61.25 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ☐ Delete Eliza**beth** A.Elwinael NAME MILLER, ELLEN 4501 NE 21 Me \$ 209 STREET ADDRESS STREET ADDRESS 4501 NE 21 AVE #212 CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL 33308 TITLE D ☐ Delete TITLE Change ☐ Addition NAME KELLEY, MICHELLE NAME STREET ADDRESS 4501 NE 21ST AVE APT 106 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FORT LAUDERDALE FL 33308 TITLE ☐ Delete TITLE Change ☐ Addition TOPOLSKI, THOMAS NAME NAME STREET ADDRESS STREET ADDRESS 4501 NE 21 AVE #314 CITY-ST-7IP CITY-ST-ZIP FORT LAUDERDALE FL 33308 TITLE D Delete TITLE Addition NAME CROWLEY, JOSEPH NAME STREET ADDRESS STREET ADDRESS 4501 NE 21ST AVE., APT 202 CITY-ST-ZIP FT LAUDERDALE FL 33308 CITY-ST-ZIP TITLE ☐ Delete TITLE ■ Addition SANFORD BESSINS NAME NAME Bessins, Souford 740 S. Pederal Hwy 4609 STREET ADDRESS 740 S FEDERAL HWY #609 STREET ADDRESS CITY-ST-ZIP POMPANO BEACH FL 33062 CITY-ST-ZIP Pompono Bch. FL. TITLE ☐ Delete TITLE Change Addition FRAZIER, CHARLES NAME NAME STREET ADDRESS 4501 N.E. 21ST AVE., APT. 206 STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE FL 33308 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(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 seport as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachmen with an additional statute.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-17-0.

954) 942 - 5257 Daytime Phone #