

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 748578

FILED
Apr 27, 2002 8:00 AM
Secretary of State

Entity Name: THE COURTYARD CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

111 LAKE AVENUE, #9
LAKE WORTH, FL 33460

New Principal Place of Business:

Current Mailing Address:

111 LAKE AVENUE, #9
LAKE WORTH, FL 33460

New Mailing Address:

FEI Number: 59-1935780

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAYNARD, VICTORIA
111 LAKE AVE W 1
LAKE WORTH, FL 33460 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: BEKKALA, PETER
Address: 111 LAKE AVE #2
City-St-Zip: LAKE WORTH, FL 33460

Title: DVP () Delete
Name: MORMELO, JOAN
Address: 111 LAKE AV 7
City-St-Zip: LAKE WORTH, FL 33460

Title: DTS () Delete
Name: MAYNARD, VICTORIA
Address: 111 LAKE AVE #1
City-St-Zip: LAKE WORTH, FL 33460

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DT (X) Change () Addition
Name: MORMELO, JOAN
Address: 111 LAKE AVE #7
City-St-Zip: LAKE WORTH, FL 33460

Title: DS (X) Change () Addition
Name: TRUDEAU, STEPHENIE
Address: 111 LAKE AVE #8
City-St-Zip: LAKE WORTH, FL 33460

Title: DVP () Change (X) Addition
Name: JASMIN, DAVID
Address: 1706 KATHERINE ST
City-St-Zip: LAKE WORTH, FL 33460

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOAN MORMELO

DT

04/27/2002

Electronic Signature of Signing Officer or Director

Date