## 2001 UNIFORM BUSINESS REPORT (UBR)

## Apr 06, 2001 8:00 am Secretary of State **DOCUMENT # 751424** 1. Entity Name 04-06-2001 90060 050 \*\*\*\*61.25 BALLANTRAE CONDOMINIUM ASSOCIATION OF PALM BEACH Principal Place of Business Mailing Address 4333 N. OCEAN BLVD. 4333 N. OCEAN BLVD. **DELRAY BEACH FL 33483** DELRAY BEACH FL 33483 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1995685 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) HOLLAND & KNIGHT, LLP ONE EAST BROWARD BLVD ATTN; ROBERT E. FERRIS, JR. Zip Code FT. LAUDERDALE FL 33301 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. FEE IS \$61.25 Added to Fees Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. ☐ Change **Addition** T(T) F Delete TITI F SD **VD** Miller, Janet M. NAME NAMÉ WILLIS, JEAN 4333 N. Ocean Blod, Apt CS2 STREET ADDRESS STREET ADDRESS 4333 N. OCEAN BLVD CITY-ST-ZIP CITY-ST-7IP Delray Buh FL 33483 DELRAY BEACH, FL 0 Addition X Detete ☐ Change TITLE SD TITLE Gottfred, Ronald E. 4333 N. Ocean Blud, Apt NAME NAME TAYLOR, JEROME STREET ADDRESS STREET ADDRESS 4333 N. OCEAN BLVD., APT. AN4. CITY-ST-ZIP CITY-ST-ZIP Delray Bich. FL DELRAY BEACH, FL 0 Change TITLE ☐ Delete TITLE Addition NAME BUNGEROTH, ROLF NAME STREET ADDRESS STREET ADDRESS 4333 N. OCEAN BLVD. APT. BN5 CITY-ST-ZIP CITY-ST-ZIP <u>DELRAY BEACH FL</u> D TITI F ☐ Delete Change <del>TD</del> TITLE Addition NAME HOYE, EILEEN NAME STREET ADDRESS STREET ADDRESS 4333 N OCEAN BLVD, B54 CITY-ST-ZIP CITY-ST-ZIP DELRAY BEACH FL 33483 TITLE ☐ Delete TITI F ☐ Change ☐ Addition NAME CAREY, CHARLES NAME STREET ADDRESS 4333 N OCEAN BLVD D52 STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP **DELRAY BCH FL 33483** Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME

12. I hereby certify that the information supplied with this filing 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-7IP

STREET ADDRESS

CITY-ST-ZIP