

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 753860

1. Entity Name

VILLA PISANI CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

445 SE TWENTY-FIRST AVE
DEERFIELD BEACH FL 33441

Mailing Address

445 SE TWENTY-FIRST AVE
DEERFIELD BEACH FL 33441

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2216358

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PISANI, FRANK
445 S.E. TWENTY-FIRST AVENUE
DEERFIELD BEACH FL

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME GIUSTI, STEVE
STREET ADDRESS 445 S.E. 21ST AVE.
CITY-ST-ZIP DEERFIELD FL 33441

TITLE P/Director ☐ Change ☐ Addition
NAME Giusti, Steve
STREET ADDRESS 445 S.E. 21st Ave
CITY-ST-ZIP Deerfield Fl. 33441

TITLE VPD ☐ Delete
NAME HAMILTON, RUSS
STREET ADDRESS 340 E 93RD ST.
CITY-ST-ZIP NEW YORK NY 10128

TITLE VP/Director ☐ Change ☐ Addition
NAME Sue Bridgman
STREET ADDRESS 445 S.E. 21st Ave
CITY-ST-ZIP Deerfield Fl. 33441

TITLE ST ☐ Delete
NAME MIESZALA, LOIS
STREET ADDRESS 1600 THACKER ST.
CITY-ST-ZIP DES PLAINES FL

TITLE Secretary/Treasurer ☐ Change ☐ Addition
NAME Lois A. Mieszala
STREET ADDRESS 1600 Thacker St
CITY-ST-ZIP Des Plaines, IL 60016

TITLE BOD ☐ Delete
NAME PISANI, VINCENT
STREET ADDRESS 445 SE 21ST AVE
CITY-ST-ZIP DEERFIELD FL 33441

TITLE Director ☐ Change ☐ Addition
NAME Russ Hamilton
STREET ADDRESS 340 E. 93rd, Street
CITY-ST-ZIP New York, N.Y. 10128

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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.

SIGNATURE:

Lois A. Mieszala
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-10-00

Date

Daytime Phone #

FILED
May 01, 2000 8:00 am
Secretary of State

05-01-2000 90014 006 ****61.25



DO NOT WRITE IN THIS SPACE