FILED 2002 UNIFORM BUSINESS REPORT (UBR) Aug 04, 2002 8:00 am Secretary of State **DOCUMENT # 753860** 1. Entity Name 06-27-2002 90184 034 \*\*\*\*61.25 VILLA PISANI CONDOMINIUM ASSOCIATION, INC. 08-04-2002 90159 001 \*\*\*\*61.25 Mailing Address Principal Place of Business % AMERICAN ASSOCIATIONS. LLC 445 SE TWENTY-FIRST AVE DEERFIELD BEACH FL 33441 21911 LAKE FOREST CIR., #105 **BOCA RATON FL 33433** 2. Principal Place of Business 3. Mailing Address TED LANZARO Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. 1300 N. FEDERAL HWY SUITE 202 4. FEI Number Applied For City & State 59-2216358 BOCA RATON Not Applicable Country \$8.75 Additional Zip Country Zip 5. Certificate of Status Desired USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LANZARO Street Address (P.O. Box Number is Not Acceptable) KELHOFFER, RAYMOND % AMERICAN ASSOCIATIONS, LLC 21911 LAKE FOREST CIR., #105 City Zip Code 334 **BOCA RATON FL 33433** BOCA RATON 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. I am familiar with, and accept the obligations of registered agent SIGNATURE (NOTE: Registered Agent signature required when reinstating) DEFORE 9-13-02 = 61-25 9. Election Campaign Financing Make Check Payable to After September 13, 2002, \$5.00 May Be Trust Fund Contribution. Added to Fees **Department of State** min. will be \$236.25. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. PD ☐ Change ☐ Addition TITLE ☐ Delete TITLE GIUSTI, STEVE NAME NAME STREET ADDRESS STREET ADDRESS 445 S.E. 21ST AVE., #205 CITY-ST-ZIP CITY-ST-ZIP DEERFIELD BEACH FL 33441 ☐ Addition Delete TITLE ☐ Change TITLE BRIDGMAN, ROBERT NAME NAME STREET ADDRESS STREET ADDRESS 445 S.E. 21ST AVE., #202 CITY-ST-ZIP CITY-ST-7/P **DEERFIELD BEACH FL 33441** STD Delete TITLE Change Addition TITLE PISANI, MICHAEL NAME NAME STREET ADDRESS 445 S.E. 21ST AVE., #201 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF DEERFIELD BEACH FL 33441 ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition Delete TITLE ☐ Change TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Defete TITLE NAME NAME STREET ADDRESS STREET ADDRESS C!TY-ST-ZIP CITY-ST-ZIF 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

SIGNATURE: 18 DECATA DE QUIRA ESIDENT, STEVE GIVET / 24/0 2 954 481 9351

all other like empowered

changed, or on an attachment with an address, v