

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 753996

1. Entity Name

CONDOMINIUM "B" ASSOCIATION AT SHERWOOD SQUARE,

FILED
Mar 02, 2000 8:00 am
Secretary of State

03-02-2000 90080 034 ****61.25

Principal Place of Business

1155 RIVERSIDE DR
CORAL SPRINGS FL 33071

Mailing Address

1155 RIVERSIDE DR
CORAL SPRINGS FL 33071-7003

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2096192

Applied For

Not Applicable

Zip

Country

Zip

Country

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

WIELOCH, JEAN
1075 RIVERSIDE DRIVE
#306
CORAL SPRINGS FL 33071

Name
~~James Phillips~~

Street Address (P.O. Box Number is Not Acceptable)
8735 Ramblewood Drive #212

City
Coral Springs

FL

Zip Code
33071

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

~~James Phillips, Secretary~~

(NOTE: Registered Agent signature required when reinstating)

~~02/23/2000~~

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 SD ☒ Delete
NAME WIELOCH, JEAN
STREET ADDRESS 1075 RIVERSIDE DR, #306
CITY-ST-ZIP CORAL SPRINGS FL 33071

TITLE SD ☐ Change ☒ Addition
NAME James Phillips
STREET ADDRESS 8735 Ramblewood Drive #212
CITY-ST-ZIP Coral Springs, Fl 33071

TITLE TD ☐ Delete
NAME DWYER, JOHN
STREET ADDRESS 1075 RIVERSIDE DRIVE 507
CITY-ST-ZIP CORAL SPRINGS FL

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

TITLE VD ☐ Delete
NAME BRAVERMAN, MARK
STREET ADDRESS 1075 RIVERSIDE DR, #508
CITY-ST-ZIP CORAL GABLES FL 33071

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

TITLE TD ☒ Delete
NAME GIDVANINI, JOSEPH
STREET ADDRESS 1075 RIVERSIDE DRIVE #106
CITY-ST-ZIP CORAL SPRINGS FL 33071

TITLE TD ☐ Change ☒ Addition
NAME Yolanda Houghton
STREET ADDRESS 7705 NW 5th Court #207
CITY-ST-ZIP Margate, Fl 33063

TITLE D ☐ Delete
NAME HEIMINK, STELLA
STREET ADDRESS 1075 RIVERSIDE DR #304
CITY-ST-ZIP CORAL SPRINGS FL 33071

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:

~~SIGNATURE REQUIRED~~
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James Phillips, Secretary

Date

Daytime Phone #

(954) 757-1620

02/23/2000

CR2E037 (9/99)