

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 07, 2002 8:00 am
Secretary of State

03-11-2002 90068 029 ****61.25

DOCUMENT # 754503

1. Entity Name

GLADEWIND HEIGHTS HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

MIAMI MANAGEMENT
14275 SW 142 AVE
MIAMI FL 33186

MIAMI MANAGEMENT
14275 SW 142 AVE
MIAMI FL 33186

21223

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

59-2115921

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

Name

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

City

FL

Zip Code

MIAMI MANAGEMENT
14275 SW 142 AVE
MIAMI FL 33186

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
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
DV BENNETT, BARBARA ☒ Delete
11278 SW 91 TR
MIAMI FL 33176

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
PRES. JOAN HILL ☐ Change ☐ Addition
9286 SW 112 PL.
MIAMI, FL 33176

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
DT MICHALSON, JEFF ☐ Delete
9023 SW 112TH PLACE
MIAMI FL 33176

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
TRES. JEFF MICHALSON ☐ Change ☐ Addition
9023 SW 112 PL
MIAMI FL 33176

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
D HILL, JOAN ☐ Delete
9286 SW 112 PLACE
MIAMI FL 33176

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
VP FERNANDO MARTINEZ ☐ Change ☒ Addition
11268 SW 90LN.
MIAMI FL 33176

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
D FERNANDO MARTINEZ ☐ Delete
11268 SW 90LN
MIAMI FL 33176

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
D ALFREDO BILD ☐ Change ☒ Addition
11636 No. KENDALL DR.
MIAMI FL 33176

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
D ALFREDO BILD ☐ Delete
11636 No. Kendall Dr
MIAMI, FL 33176-1005

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

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

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 REQUEST

2-21-02

305-0130X140

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)