2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 754533

FILED Jan 03, 2003 Secretary of State

Entity Name: BERKSHIRE-BY-THE-SEA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 126 NORTH OCEAN BLVD. DELRAY BEACH, FL 33483 **Current Mailing Address: New Mailing Address:** 126 NORTH OCEAN BLVD DELRAY BEACH, FL 33483 FEI Number: 59-2118671 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NOISEUX, ANDRE 126 N OCEAN BLVD DELRAY BEACH, FL 33483 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: TREA () Delete TREA (X) Change () Addition CONDIE. PARKER Name: AVERY, RALPH Name: 9909 CLAYTON RD. #207 Address: 7850 FAIRWAY TRAIL Address: City-St-Zip: ST-LOUIS, MO 63124 US City-St-Zip: BOCA RATON, FL 33487 Title: () Delete Title: () Change () Addition GOLDSTEIN, ROBERT Name: Name: Address: 6828 N. BARNETT LANE Address: City-St-Zip: MILWAUKEE, WI 53217 US City-St-Zip: Title: SEC () Delete Title: () Change () Addition WETZELL, GERI Name: Name: 271 BROWN BEAR CROSSING Address: Address: City-St-Zip: NAGOG WOODS, MA 01718 US City-St-Zip: Title: () Delete Title: (X) Change () Addition TOMENSON, ROGERS Name: Name: SPINELLI, PETER 19 STUBBS DRIVE 20 MOSSFIELD RD. Address: Address: City-St-Zip: WILLOWDALE, ONTARIO, ON CANADA CA City-St-Zip: NEWTON, MA 02468 Title: () Delete Title: (X) Change () Addition CAHALY, RICHARD CAHALY, RICHARD Name: Name: 111 KENDALL ROAD 111 KENDALL ROAD Address: Address: City-St-Zip: LEXINGTON, MA 02421 US City-St-Zip: LEXINGTON, MA 02421 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GERI WETZELL S 01/03/2003