2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # **755499** Apr 22, 2000 8:00 am Secretary of State 1. Entity Name CYPRESS CHASE NORTH CONDOMINIUM NO. 1 ASSOCIATIO 04-22-2000 90118 001 ****61.25 Principal Place of Business Mailing Address 3341 NW 47TH TERR 3341 NW 47TH TERR LAUDERDALE LAKES FL 33319-6729 LAUDERDALE LAKES FL 33319 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-2066707 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) POLIAKOFF, GARY A., ESQ. 3111 STERLING ROAD FT. LAUDERDALE FL 33312 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing **\$5.00** May Be Make Check Payable to FILE NOW: Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. ☐ Addition ☐ Delete TITLE TITI F NAME BECK, EUGENE NAME STREET ADDRESS STREET ADDRESS 3341 NW 47 TERR CITY-ST-ZIP CITY-ST-ZIP LAUDERDALE LKS FL 33319 ☐ Addition ☐ Change TITLE VPD. Delete TITLE NAME BECK, CHARLOTTE NAME STREET ADDRESS STREET ADDRESS 3361 NW 47TH TERR CITY-ST-ZIP CITY-ST-ZIP Laud<u>er</u>dale LKS FL 3331<u>9</u> Change Addition TITLE TD ☐ Delete TITLE NAME NAME KELLER, MILDRED STREET ADDRESS STREET ADDRESS 3341 NW 47 TERR CITY-ST-ZIP CITY-ST-ZIP <u>LAUDERDALE LKS FL 33319</u> Addition ☐ Change TITLE ☐ Delete TITLE NAME FILION, JEAN-LOUIS STREET ADDRESS STREET ADDRESS 3341 NW 47TH TERR CITY-ST-ZIP CITY-ST-ZIP Lauderdale LKS FL 33319 Change Change TITLE Delete TITLE Addition JUSTIN, INA ---NAME STREET ADDRESS STREET ADDRESS 3341 NW 47TH TERR CITY-ST-ZIP CITY-ST-ZIE L'AUDERDALE LKS FL-33319 ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 suppliemental 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

changed, or on an attachment with an address, with all other like empowered.

4/1400

914-484-8713

Daytime Phone #