

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 08, 2002 8:00 am
Secretary of State

05-08-2002 90137 011 ****61.25

DOCUMENT # 757701

1. Entity Name

THE MERIDIAN OF PALM BEACH CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

**3300 S.OCEAN BLVD.
 PALM BEACH FL 33480**

**3300 S.OCEAN BLVD.
 PALM BEACH FL 33480**

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

59-2109191

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

**WURTZEL, LEO
 3300 S OCEAN BLVD., #102 S
 PALM BEACH FL 33480**

Name

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

City

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 **LEO WURTZEL**

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 **Treasurer** ☒ Change ☐ Delete
 NAME **SHAPIRO, MARILYN**
 STREET ADDRESS **3300 S OCEAN BLVD**
 CITY-ST-ZIP **PALM BCH FL**

TITLE **Secretary** ☐ Change ☒ Addition
 NAME **Ed Sackel**
 STREET ADDRESS **3300 South Ocean Blvd.**
 CITY-ST-ZIP **Palm Beach FL 33480**

TITLE **D** ☒ Delete
 NAME **MILLER, CARL**
 STREET ADDRESS **3300 S.OCEAN BLVD.**
 CITY-ST-ZIP **PALM BEACH FL 33480**

TITLE **Director** ☐ Change ☒ Addition
 NAME **Marvin Comisky**
 STREET ADDRESS **3300 South Ocean Blvd**
 CITY-ST-ZIP **Palm Beach FL 33480**

TITLE **D** ☒ Delete
 NAME **DICKMAN, ALBERT**
 STREET ADDRESS **3300 S OCEAN BLVD**
 CITY-ST-ZIP **PALM BEACH FL 33480**

TITLE **Director** ☐ Change ☒ Addition
 NAME **David Nash**
 STREET ADDRESS **3300 S.Ocean Blvd.**
 CITY-ST-ZIP **Palm Beach FL 33480**

TITLE **D** ☐ Delete
 NAME **SEGEL, IRA**
 STREET ADDRESS **3300 S OCEAN BLVD**
 CITY-ST-ZIP **PALM BEACH FL 33480**

TITLE **Director** ☐ Change ☒ Addition
 NAME **Byron Schader**
 STREET ADDRESS **3300 S.Ocean Blvd.**
 CITY-ST-ZIP **Palm Beach FL 33480**

TITLE **President** ☐ Delete
 NAME **Leo Wurtzel**
 STREET ADDRESS **3300 S.Ocean Blvd.**
 CITY-ST-ZIP **Palm Beach FL 33480**

TITLE **Director** ☐ Change ☒ Addition
 NAME **Ed Seligman**
 STREET ADDRESS **3300 S.Ocean Blvd.**
 CITY-ST-ZIP **Palm Beach FL 33480**

TITLE **Vice President** ☐ Delete ☒ Addition
 NAME **Herbert Kolsky**
 STREET ADDRESS **3300 S.Ocean Blvd.**
 CITY-ST-ZIP **Palm Beach, FL 33480**

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: **Leo Wurtzel**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

561.582.9830

4-29-02 4-29-

CR2E037 (9/01)