

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2003 8:00 am
Secretary of State

04-23-2003 90186 009 ****61.25

DOCUMENT # 757728

1. Entity Name

THE COURTYARD CONDOMINIUM ASSOCIATION, INC. OF RIVIERA BEACH



Principal Place of Business

**1100 SURF ROAD
SINGER ISLAND FL 33404
US**

Mailing Address

**1100 SURF ROAD
SINGER ISLAND FL 33404
US**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-2380893**

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**JOHN MCDADE
1100 SURF ROAD
APT #105
SINGER ISLAND FL 33404**

7. Name and Address of New Registered Agent

Name

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

City

FL

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. I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **MCDADE, JOHN**
STREET ADDRESS **1100 SURF ROAD, APT 105**
CITY-ST-ZIP **SINGER ISLAND FL 33404**

TITLE **VPD** ☒ Delete
NAME **HENIG, MAX**
STREET ADDRESS **1100 SURF RD., APT. 104**
CITY-ST-ZIP **SINGER ISLAND FL 33404**

TITLE **SD** ☐ Delete
NAME **ORROK, SALLY**
STREET ADDRESS **1100 SURF RD., APT. 212**
CITY-ST-ZIP **SINGER ISLAND FL 33404**

TITLE **D** ☐ Delete
NAME **ROSENKRANZ, ALAN**
STREET ADDRESS **1100 SURF RD APT 208**
CITY-ST-ZIP **SINGER ISLAND FL 33404**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE ☐ Change ☒ Addition
NAME **VPD**
STREET ADDRESS **JONATHAN MALONE**
CITY-ST-ZIP **1100 SURF ROAD, APT. 104**
SINGER ISLAND, FL 33404

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

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

TITLE ☐ Change ☐ Addition
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:

JOHN MCDADE

JOHN MCDADE

4/17/03 (561) 863-5258

CR2E037 (10/02)