

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 758919

1. Entity Name

CYPRESS CREEK PLAZA OFFICE CONDOMINIUM ASSOCIATION

FILED
Feb 05, 2001 8:00 am
Secretary of State

02-05-2001 90027 028 ****61.25

Principal Place of Business

APPRAISAL SOURCE, INC.
6250 N. ANDREWS AVE. #204
FT. LAUDERDALE FL 33309
US

Mailing Address

APPRAISAL SOURCE, INC.
6250 N. ANDREWS AV. #204
FT. LAUDERDALE FL 33309
US

810822



2. Principal Place of Business

6250 North Andrews Avenue

Suite, Apt. #, etc.

City & State

Ft. Lauderdale FL

Zip 33309

Country Broward

3. Mailing Address

6250 North Andrews Avenue

Suite, Apt. #, etc.

City & State

Ft. Lauderdale FL

Zip 33309

Country Broward

4. FEI Number

59-2239167

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

OKRENT, STEVE
6250 N. ANDREWS AVENUE
FT. LAUDERDALE FL 33309

7. Name and Address of New Registered Agent

Name

George H. Snyder

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

6264 North Andrews Avenue

City

Fort Lauderdale

FL

Zip Code

33309

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

TITLE PD
NAME OKRENT, STEVEN ☐ Delete
STREET ADDRESS 6250 N. ANDREWS AVENUE #204
CITY-ST-ZIP FT. LAUDERDALE FL 33309

TITLE VD
NAME SILVERMAN, MARC ☐ Delete
STREET ADDRESS 6250 N. ANDREWS AVENUE #204
CITY-ST-ZIP FT. LAUDERDALE FL 33309

TITLE SD
NAME SNYDER, GEORGE H. ☐ Delete
STREET ADDRESS 5809 NE 21ST AVENUE
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE T
NAME QUINTNER, RICK ☐ Delete
STREET ADDRESS 6250 N. ANDREWS AVE. #100
CITY-ST-ZIP FT. LAUDERDALE FL

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 PD ☐ Change ☐ Addition
NAME Phillip Booth
STREET ADDRESS 6250 North Andrews Avenue
CITY-ST-ZIP Ft. Lauderdale FL 33309

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

TITLE SD ☐ Change ☐ Addition
NAME George H. Snyder
STREET ADDRESS 6264 North Andrews Avenue
CITY-ST-ZIP Ft. Lauderdale FL 33309

TITLE T ☐ Change ☐ Addition
NAME Phillip Booth
STREET ADDRESS 6250 North Andrews Avenue
CITY-ST-ZIP Ft. Lauderdale FL 33309

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: SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)