

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 764863

FILED
Apr 19, 2003
Secretary of State

Entity Name: OLD CUTLER COVE TOWNHOUSE ASSOCIATION, INC.

Current Principal Place of Business:

9110 SW 203 TERRACE
MIAMI, FL 33189 US

New Principal Place of Business:

9010 SW 203 TERRACE
MIAMI, FL 33189 US

Current Mailing Address:

9110 SW 203 TERRACE
MIAMI, FL 33189 US

New Mailing Address:

9010 SW 203 TERRACE
MIAMI, FL 33189 US

FEI Number: 65-0081163

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRIVETT, CURTIS
9070 SW 203 TERRACE
MIAMI, FL 33189 US

Name and Address of New Registered Agent:

PINA, PHILIP
9110 SW 203 TERRACE
MIAMI, FL 33189 US

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: PHILIP A. PINA, JR.

04/19/2003

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: TRIVETT, CURTIS
Address: 9070 SW 203 TERRACE
City-St-Zip: MIAMI, FL 33189

Title: PD () Delete
Name: PINA, PHILIP
Address: 9110 SW 203 TERRACE
City-St-Zip: MIAMI, FL

Title: TSD () Delete
Name: HAWKINS, MARLENE
Address: 9100 SW 203 TERRACE
City-St-Zip: MIAMI, FL 33189 US

Title: D () Delete
Name: BASCOM, WILBERT O
Address: 15681 SW 147TH COURT
City-St-Zip: MIAMI, FL 33189

Title: D () Delete
Name: GINIGER, CHRISTINE
Address: 9076 SW 203 TERRACE
City-St-Zip: MIAMI, FL 33189

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: PHILIP A. PINA, JR.

PD

04/19/2003

Electronic Signature of Signing Officer or Director

Date