2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

changed, or on an attachment with an

SIGNATURE

Mar 09, 2004 8:00 am **DOCUMENT # 765118 Secretary of State** 1. Entity Name 03-09-2004 90031 026 ****61.25 701 RIVERSIDE DRIVE CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 701 N RIVERSIDE DR POMPANO BCH FL 33062 701 N RIVERSIDE DR POMPANO BCH FL 33062 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) City & State City & State Applied For 4. FEI Number 59-2230899 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent GRANIZO, FRANK 701 N RIVERSIDE DR POMPANO BEACHEL 33062 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 SCHAFER SEC (NOTE: Registered A 9. Election Campaign Financing Make Check Payable to FILE NOW: FEE IS \$61.25 \$5.00 May Be \Box Trust Fund Contribution. Added to Fees Florida Department of State Due By May 1, 2004 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10. 11. TETLE ☐ Delete TITLE OSBORNE, J NAME NAME 701 N RIVERSIDE DR STREET ADDRESS STREET ADDRESS POMPANO BEACH FL 33062 CITY - ST - ZIP CITY-ST-ZIP VPD TITLE ☐ Delete TITLE ☐ Change ☐ Addition BAUM, J NAME NAME 701 N RIVERSIDE DR STREET ADDRESS STREET ADDRESS POMPANO BEACH FL 33062 CITY-ST-ZIP CITY-ST-ZIP SD STD SCHAFER, TITLE ☐ Delete TITLE Change Addition SHAFFER, J. NAME-701 N RIVERSIDE DR STREET ADDRESS STREET ADDRESS POMPANO BEACH FL 33062 CITY-ST-ZIP CITY-ST-ZIP VPD TITLE ☐ Delete TITLE ☐ Change Addition KAYE, IAN NAME NAME 701 N RIVERSIDE DR STREET ADDRESS STREET ADDRESS POMPANO BEACH FL 33062 CITY-ST-ZIE CITY-ST-ZIP Delete TITI F AROL ZURICK SI N. RIVERSIDE DR POMPANO BEACH, FL Addition TITLE GRANIZO, FRANK NAME NAME 701 N RIVERSIDE DR STREET ADDRESS STREET ADDRESS POMPANO FL 33062 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete 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 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

FILED