

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 02, 2001 8:00 am
Secretary of State

02-02-2001 90297 048 ****61.25

DOCUMENT # 766177

1. Entity Name

THE PINES OF OAKLAND FOREST CONDOMINIUM ASSOCIAT

Principal Place of Business

Mailing Address

C/O CASTLE GROUP
P O BOX 189013
PLANTATION FL 33318
US

C/O CASTLE GROUP
P O BOX 189013
PLANTATION FL 33318
US

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

59-2245945

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

CASTLE MANAGEMENT, INC.
4450 W SUNRISE BLVD
C-100
PLANTATION FL 33313

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.

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME SOLID, THERESA L
STREET ADDRESS 2740 S OAKLAND FOREST DR, #1101
CITY-ST-ZIP OAKLAND PARK FL

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

TITLE VD ☒ Delete
NAME KELLEY, M A
STREET ADDRESS 2720 S OAKLAND FOREST DR 702
CITY-ST-ZIP OAKLAND PARK FL

TITLE SD ☐ Change ☒ Addition
NAME KERR, GEORGE
STREET ADDRESS 2700 S. OAKLAND Forest Dr., #504
CITY-ST-ZIP OAKLAND PARK, FL

TITLE TD ☐ Delete
NAME SCHILLER, STEVE
STREET ADDRESS 2720 S OAKLAND FOREST DRIVE #910
CITY-ST-ZIP OAKLAND PARK FL

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

TITLE SD ☒ Delete
NAME DAVIS, DANA
STREET ADDRESS 2720 S OAKLAND FOREST DR 906
CITY-ST-ZIP OAKLAND PARK FL

TITLE SD ☐ Change ☒ Addition
NAME SEGRE, RUPERT A.
STREET ADDRESS 2780 S. OAKLAND FOREST DR., #1305
CITY-ST-ZIP OAKLAND PARK, FL

TITLE D ☐ Delete
NAME LAMARCA, JOHN
STREET ADDRESS 2720 S OAKLAND FOREST DR #901
CITY-ST-ZIP OAKLAND PARK FL

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

TITLE D ☒ Delete
NAME SEATESE, ANTHONY
STREET ADDRESS 2740 S OAKLAND FOREST DR #1504
CITY-ST-ZIP OAKLAND PARK FL

TITLE SD ☐ Change ☒ Addition
NAME DUNHAM, PATRICIA
STREET ADDRESS 2780 S. OAKLAND FOREST DR., #1401
CITY-ST-ZIP OAKLAND PARK, FL

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
John LAMARCA, President 1/22/01 (954) 792-6000

Date

Daytime Phone #

CR2E037 (10/00)