2002 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 25, 2002 8:00 am Secretary of State DOCUMENT # **766177** 1. Entity Name THE PINES OF OAKLAND FOREST CONDOMINIUM ASSOCIAT 03-25-2002 90143 014 ****61.25 ION, INC. Principal Place of Business Mailing Address C/O CASTLE GROUP C/O CASTLE GROUP P O BOX 189013 P O BOX 189013 PLANTATION FL 33318 PLANTATION FL 33318 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 59-2245945 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CASTLE MANAGEMENT, INC. Street Address (P.O. Box Number is Not Acceptable) 4450 W SUNRISE BLVD C-100 PLANTATION(FL*33313): (Zio Code FL 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) 43 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. Delete TITLE (9/01) TITLE ☐ Change Addition SOLIO, THERESA L BEHRENDT, PATRICIA 2740 S. CAKLAND FOREST. Dr., #1101 NAME NAME 2740 S OAKLAND FOREST DR, #1101 STREET ADDRESS STREET ADDRESS OAKLAND PARK FLT CITY-ST-ZIP CITY-ST-ZIP DAILLAND PARK FE TITLE ☐ Delete TITLE Change ☐ Addition KERR. GEORGE NAME NAME 2700 S OAKLAND FOREST DR #504 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP OAKLAND PARK FL CITY-ST-ZIP VD TITI F ☐ Delete TITLE Change ☐ Addition SCHILLER, STEVE NAME NAME STREET ADDRESS 2720 S OAKLAND FOREST DRIVE #910 STREET ADDRESS CITY-ST-ZIP Oakland Park Fl CITY-ST-7IP Delete TITLE TITLE Addition ☐ Change SEGRE, RUPERT A NAME ROBINSON, ROSEMARY. 2780 S. OAKLAND FOREST Dr., # 1306 NAME 2780 S OAKLAND FOREST DR #1305 STREET ADDRESS STREET ADDRESS CITY-ST-7IP OAKLAND PARK FL CITY-ST-ZIP oakland fark. TITLE ☐ Delete TITLE ☐ Change ☐ Addition Lamarco, John NAME NAME 2720 S OAKLAND FOREST DR #901 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP OAKLAND PARK FL CITY-ST-ZIP Delete TITLE TITLE Addition ☐ Change **DUNHAM. PATRICIA** NAME NAME 2780 S OAKLAND FOREST DR #1401 180 S. DAKLAND FOREST_L. STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with this filling 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 trootee ampowered 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

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