

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 766618

1. Entity Name

NEW HAVEN CONDOMINIUM II ASSOCIATION, INC.

FILED
May 01, 2000 8:00 am
Secretary of State

05-01-2000 90461 041 ****61.25

Principal Place of Business

5530 1ST AVE N
1700 66TH ST. NORTH #207
ST PETE FL 33110
US

Mailing Address

% CONDOMINIUM MANAGEMENT GROUP INC.
P.O. BOX 47068
ST.PETERSBURG FL 33743-7068
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

76 CMG

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

6530 1st Ave N.
City & State
St. Petersburg, FL

City & State

4. FEI Number

59-2289042

Applied For

Not Applicable

Zip

Country

33710 US

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ZACUR, RICHARD
5200 CENTRAL AVENUE
ST. PETERSBURG FL 33711

7. Name and Address of New Registered Agent

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

TITLE PD
NAME MACKENZIE, WILLIAM
STREET ADDRESS 1210 10TH CIR SE #183
CITY-ST-ZIP LARGO FL 33771 ☐ Delete

TITLE VPD
NAME RAMUNNO, LUCY
STREET ADDRESS 1111 9TH CIR S.E., #197
CITY-ST-ZIP LARGO FL ☒ Delete

TITLE S
NAME AVERY, WANDA
STREET ADDRESS 1011 10TH CIR SE #178
CITY-ST-ZIP LARGO FL 33771 ☐ Delete

TITLE TD
NAME SCHEITLEK, ANN
STREET ADDRESS 1009 10TH CIR SE #179
CITY-ST-ZIP LARGO FL 33771 ☐ Delete

TITLE D
NAME CONTI, ELEANORE
STREET ADDRESS 1215 9TH CIR SE #218
CITY-ST-ZIP LARGO FL 33771 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE D
NAME Bates, Carol
STREET ADDRESS 1204 10th Circle SE, # 186
CITY-ST-ZIP LARGO, FL 33771 ☐ Change ☒ Addition

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

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

TITLE D
NAME Immell, Connie
STREET ADDRESS 1210 9th Circle SE #208
CITY-ST-ZIP LARGO, FL 33771 ☐ Change ☒ Addition

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

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:

Richard Mackenzie
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-30-2000

Date

Daytime Phone #

CR2ER37 10/99