2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 20, 2001 8:00 am
Secretary of State
02-20-2001 90041 050 ****61.25

DOCUMENT # N00000004908 ✓

1. Entity Name

OAK TREE Plaza ASSOCIATION, INC.

Principal Place of Business	Mailing Address c/o ProProperty MGMT.
Oaktree Plaza Association, Inc. 4700 W. Prospect Road, # 102 Ft. Lauderdale, FL 33301-8001	2176 W. Oakland Pk Blvd. Ft. Lauderdale, FL 33311

A0024851

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address c/o ABO Property MGMT.
Oaktree Plaza Association, Inc	
Suite, Apt. #, etc. 4700 W. Prospect Road # 102	Suite, Apt. #, etc. 2176 W. Oakland Pk Blvd.
City & State Ft. Lauderdale, FL	City & State Ft. Lauderdale, FL
Zip / Country 33301-8001 / USA	Zip / Country 33311 / USA

4. FEI Number — ✓ 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
VALDES-FAULI CORP SERVICES, INC. 500 EAST BROWARD BLVD. SUITE 1400 FT. LAUDERDALE, FL 33394	Name: ProProperty MGMT. Inc Street Address (P.O. Box Number is Not Acceptable): 2176 W. Oakland Park Blvd. City: Ft. Lauderdale FL Zip Code: 33311

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 _____ 2/01/01
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	President, DIRECTOR JOHN McCarthy 9939 NW 65th Court Tamarac, FL 33321 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President RON ENGLE 4700 PROSPECT RD SUITE 105 FT. LAUDERDALE, FL ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY, TREASURER DANIEL W. BARTON 2176 W. OAKLAND PARK BLVD. FT. LAUDERDALE, FL 33311 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR ROSE FLAVIN 3270 SEAWARD DR POMPANO BCH, FL 33062 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR MATTHEW DANDREA 2700 OAK TREE CIRCLE OAKLAND PARK, FL 33309 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (11/00)

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: _____ 2/01/01 954-733-3100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #