

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N01623

1. Entity Name

PRINCETONIAN HOMEOWNERS ASSOCIATION, INC.

FILED
Mar 04, 2000 8:00 am
Secretary of State

03-04-2000 90045 019 ****61.25

Principal Place of Business

Mailing Address

LAND CAP PROP. SERV.
13800 S.W. 144 AVE. ROAD
MIAMI FL 33186
US

LAND CAP PROP. SERV.
13800 S.W. 144 AVE. ROAD
MIAMI FL 33186-6765
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

4. FEI Number

59-2390035

Applied For

Not Applicable

Zip

Country

Zip

Country

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

SUITS, STEPHEN
C/O LAND CAP PROPERTY SERVICES
13800 S.W. 144 AVE. ROAD
MIAMI FL 33186

Name

Marlene Leon-Rubido, Esquire

Street Address (P.O. Box Number is Not Acceptable)

8500 W. Flagler St. A105

City

Miami

FL

Zip Code

33144

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 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 BRADEN, PHILLIP
STREET ADDRESS 25061 SW 125 CT.
CITY-ST-ZIP MIAMI FL

TITLE PD ☒ Change ☐ Addition
NAME BRADEN, PHILLIP
STREET ADDRESS 25061 SW 125 CT
CITY-ST-ZIP PRINCETON, FL 33032

TITLE VPD ☐ Delete
NAME RAMIREZ, FRANK
STREET ADDRESS 12581 SW 248 TERR
CITY-ST-ZIP PRINCETON FL 33032

TITLE SD ☒ Change ☐ Addition
NAME RAMIREZ, FRANK
STREET ADDRESS 12581 SW 248 TERRACE
CITY-ST-ZIP PRINCETON, FL 33032

TITLE TD ☐ Delete
NAME FISCHER, MICHELE
STREET ADDRESS 25081 SW 125 CT.
CITY-ST-ZIP MIAMI FL 33032

TITLE TD ☒ Change ☐ Addition
NAME FISCHER, MICHELE
STREET ADDRESS 25081 SW 125 CT
CITY-ST-ZIP PRINCETON, FL 33032

TITLE D ☐ Delete
NAME BENNETT, THOMAS
STREET ADDRESS 24930 S.W. 126 CT.
CITY-ST-ZIP MIAMI FL

TITLE D ☒ Change ☐ Addition
NAME BENNETT, THOMAS
STREET ADDRESS 24930 SW 126 COURT
CITY-ST-ZIP PRINCETON, FL 33032

TITLE SD ☐ Delete
NAME RIVERA, CARLOS
STREET ADDRESS 12500 SE 250 TERR
CITY-ST-ZIP MIAMI FL 33189

TITLE VD ☒ Change ☐ Addition
NAME RIVERA, CARLOS
STREET ADDRESS 20279 OLD CUTLER RD
CITY-ST-ZIP MIAMI, FL 33189

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)