

**2003 NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Aug 18, 2003 8:00 am**  
**Secretary of State**

7/21

07-28-2003 90135 004 \*\*\*\*61.25

**DOCUMENT # N02000008925**

1. Entity Name

**THE VAN-DEERE CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business

**3000 S. RIDGEWOOD AVE.  
SOUTH DAYTONA FL 32119**

Mailing Address

**3000 S. RIDGEWOOD AVE.  
SOUTH DAYTONA FL 32119**

**55054381**

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

☒ Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**SWEET, JEFFREY C  
595 W. GRANADA BLVD., STE. A  
ORMOND BEACH FL 32174**

7. Name and Address of New Registered Agent

Name **ALAN VAN NIMWEGEN**  
Street Address (P.O. Box Number is Not Acceptable)  
**1816 WILSON DRIVE**  
City **DAYTONA BEACH, FL** Zip Code **32124**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**7/21/03**

DATE

**FILE NOW: FEE IS \$61.25**  
**After September 10, 2003, min will be \$236.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	BERGER, MAX M	
STREET ADDRESS	3000 S. RIDGEWOOD AVE.	
CITY-ST-ZIP	SOUTH DAYTONA FL 32119	
TITLE	STD	<input type="checkbox"/> Delete
NAME	NIMWEGEN, ALAN V	
STREET ADDRESS	3000 S. RIDGEWOOD AVE.	
CITY-ST-ZIP	SOUTH DAYTONA FL 32119	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	SWEET, JEFFREY C	
STREET ADDRESS	595 W. GRANADA BLVD., STE. A	
CITY-ST-ZIP	ORMOND BEACH FL 32174	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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:

**ALAN VAN NIMWEGEN** **7/21/03** **407-323-5163**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (4/03)