1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N04293

LIBERTY SQUARE CONDOMINIUM ASSOCIATION, INC.

| Principal Place of Busines |
|----------------------------|
| C/O CASTLE GROUP |
| P.O. BOX 189013 |
| PLANTATION FL 33318 |
| US |

FILED Mar 04, 1999 8:00 am § Secretary of State

03-04-1999 90161 027 ****61.25

| Principal Place | of Business | Mailing Ad | idress | | | | | | | | |
|---|---|----------------------|---------------------|-------------|---|---|----------------------------------|-----------------|----------------|---------------|--------------|
| C/O CASTLE (| | | LE GROUP | | | | | | | | |
| P.O. BOX 1890 | | P.O. BOX | | | | | | | | | A BABIL 1881 |
| PLANTATION FL 33318 US PLANTATION FL 33318 US | | | | | | | 7 100 11.01 | | | | |
| 00 | | • | | | | 1 | | | | | |
| 2. Principal Pl | lace of Business | Za. Mailing | Address | | | | Date Incorporated | or Qualifed | | | • |
| 21 | | 26 | 26 | | | | 07/20/1984 | | | | |
| Suite, Apt. | #, etc. | | Suite, Apt. #, etc. | | | | 4. FEI Number Applied For | | | | |
| 22 | | 27 | 27 | | | | 59-2501056 Not Applicable | | | | |
| City & State | 9 | City & | City & State | | | | Certificate of Status | s Desired | ⊐ · · | \$8.75 A | |
| 23 | | 28 | | | | | | | <u> </u> | Fee Red | |
| Zip | Country | Zip | Zip Country | | | 6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees | | | | | |
| 24 | 25 | 29 | <u>-</u> | 30 | <u>.</u> | 10 | Trust Fund Contrib | | vietorad A | | rees |
| | 9. Name and Address of Cur | rent Registered A | gent | 8 | 1 Name | | Name and Addre | 88 OI MAM LAS | listelen V | Bent | |
| | | | | ľ | 1 Maine | | | , | | | |
| | Roperty Services Group | INC | | 8 | 2 Street | at Address (P.O. Box Number is Not Acceptable) | | | | | |
| | it sunrise blvd. | | | 8 | 2 | | | * | | · · · · · | |
| SUITE C-1 | | | | 1° | 1 | | | | | | |
| PLANTATIO | ON FL 33313 | | | 8 | 4 City | | | | EI. | 85 Zip C | ode |
| 44 = | to the provisions of Sections 617.0 | 2500 1047 4500 | Clasida Ctatuta | a the ebo | uo namad | Loomoration | n cubmite this state | ment for the nu | mose of c | nanging its i | registered |
| office or r | to the provisions of Sections 617.6 egistered agent, or both, in the Sta m familiar with, and accept the ob | ate of Florida, Suci | n change was au | ithorized b | v tne corb | oration's bo | pard of directors. I h | ereby accept t | he appoint | ment as reg | istered |
| SIGNATURE | | | | | | | | <u>.</u> | | | |
| Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re | | | | | egistered Agent signature required when reinstating) DATE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | | | | | |
| 12. | | AND DIRECTORS | DELETE | 1.1 TITLE | | <u> </u> | ADDITION OF THE | 020 10 01111 | | Change | Addition |
| TITLE | PD CCADA JOUN | | _ SELETE | 1.2 NAME | | | | | | _ , | |
| NAME | SCARA, JOHN | | | | Et address | | | - | | • | |
| STREET ADDRESS | | • | | 1.4 CITY | | ' | | | | | |
| CrTY-ST-ZIP | DEERFIELD BEACH FL 3344 SD | | ☐ DELETE | 2.1 TITLE | | | | | <u></u> | Change | ☐ Addition |
| TITLE | | | | 2.2 NAME | | | | | | | |
| NAME | PICKETT, MICKEY 2851 OCEAN BLVD., #IN | | | | - Et address | | | | | | |
| STREET ADDRESS | BOCA RATON FL | | | 2.4 CfTY | | - | ~ | ~ - | _ = | ···· | ~ → |
| CITY-ST-ZIP TITLE | TD | | DELETE | 3.1 TITLE | | | | | | Change | Addition |
| NAME | KEITH, BETTY | | | 3.2 NAME | | | | | | | - |
| STREET ADDRESS | 409 LIBERTY COURT | | | | - ET ADDRESS | | | | | , | , |
| CITY-ST-ZIP | DEERFIELD BEACH FL 3344 | 9 | | 3.4. CITY | | | | - | | | |
| TITLE | OCCINICED DENOTITE GOTT | | DELETE | 4,1 TITLE | | VT | | | | Change | Addition |
| NAME | | | | 4. 2 NAM | E | I popul | JA, FRANK- | Jr. | • | | |
| STREET ADDRESS | | | | 4.3 STRE | ET ADDRESS | 208 L | JALLIU CON | ez | | | |
| CITY-ST-ZIP | | | | 4.4 CITY | ST-ZIP | Deeche | eld BEACH. | E 334 | 1 2 | | |
| TITLE | | | ☐ DELETE | 5.1 TITLE | | 7 | | | | Change | Addition |
| NAME | | | | 5.2 NAM | E | Ferro | , Rudolph | | | | |
| STREET ADDRESS | | | | 5.3 STRE | ET ADDRESS | | busy Court | | | | 1 |
| CITY-ST-ZIP | | | | 5.4 CITY | ST-ZIP | Deerfie | ud BEAch. | ر . | | | |
| TITLE | | | DELETE | 6.1 TITLE | | | | 1 1 2 | | ☐ Change | · Addition |
| NAME | | | | 6.2 NAMI | = | | | | | | ľ |
| STREET ADDRESS | | | | 6.3 STRE | ET ADDRESS | 3 ' | | | | | ļ |
| | 1 | | | 64 CITY | ST. 7IP | | | | | | ļ |

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: