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

DOCUMENT # N08617

1. Entity Name

CORAL SPRINGS COMMERCIAL PLAZA CONDOMINIUM ASSOC

IATION, I	NC.	AZA GONI	DOMINATORAL WO	300						
12323 NORTHWEST 35TH STREET 12323		12323	ailing Address 23 Northwest 35th Street RAL Springs FL 33065				20001282			
						1 10 27 (12) 87 (12)	Bi 18118 Birdi 2181) 1887 Birdi Alb	II ala d aked ad	EZO BRONI KANI	
2. Principal Place of Business 3. Ma			Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
City & State			City & State			4. FEI Number 59-2360241 Applied For				
Zip Country		Zij	Zip Co		ntry	5. Certificate of St	5. Certificate of Status Desired \$8.75 Additional		ditional	
6. Name and Address of Current Registe			red Agent			Fee Required 7. Name and Address of New Registered Agent				
'			- Agoin		Name	7. Name and Add	ress of New Registered	Agent		
	, allen R. .w. 35th St.			Street Address (P.O. Box Number is Not Acceptable)						
CORAL S	SPRINGS FL 33065								7-2	
	e named entity submits this statemer				City		FL	Zip Coo		
SIGNATURE Signature, typed or printed name of registered agent and title if ap FILE NOW: FEE IS \$61.25			oplicable. (NOTE: Registered Agent signature required 9. Election Campaign Financing Trust Fund Contribution.			\$5.00 May Be Added to Fees	\$5.00 May Be Make Check Payable to			
10.	OFFICERS AND	DIRECTORS	·	11.		ADDITIONS/CHANGE	S TO OFFICERS AND DI	RECTORS IN	110	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	HOFFER, ALLEN R. 12329 N.W. 35TH ST. CORAL SPRINGS FL		☐ Delete	TITLE NAME STREE CITY-S	TADDRESS			Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FOGUTH, DEBBIE 12329 NW 35TH ST CORAL SPRGS FL		☐ Delete	TITLE NAME STREET	T ADDRESS		-	Change	☐ Addition	
TITLE NAME Street Address City-St-Zip	D Brewer, Paul E 12321 NW 35TH ST Coral Sprgs Fl		☐ Delete	TITLE NAME STREET CITY-S	ADDRESS			Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			Delete .	TITLE NAME STREET CITY-S	ADDRESS IT-ZIP		X	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME	ADDRESS	P-1		☐ 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.

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

☐ Delete

☐ Change

☐ Addition

FILED

Jan 13, 2003 8:00 am Secretary of State

01-13-2003 90845 015 ****61.25

CR2E037 (10/02)