

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N10337

1. Entity Name

COURT ROYALE CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Apr 25, 2001 8:00 am**  
**Secretary of State**

04-25-2001 90037 023 \*\*\*\*\*70.00

0001565

Principal Place of Business

2900 UNIVERSITY DR  
CORAL SPRINGS FL 33065-4152  
US

Mailing Address

2900 UNIVERSITY DR  
2900 UNIVERSITY DRIVE  
CORAL SPRINGS FL 33065  
US

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

59-2832973

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

LAQUIS, GEORGE A.  
10168 W. SAMPLE ROAD  
CORAL SPRINGS FL 33065

7. Name and Address of New Registered Agent

Name

Pauline Rahael

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

2900 University Drive

City

Coral Springs

FL

Zip Code

33065

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

*Rahael*

Pauline Rahael, Vice President

04/05/01

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

TITLE PD  
NAME LAQUIS, GEORGE A. ☐ Delete  
STREET ADDRESS 10168 W. SAMPLE ROAD  
CITY-ST-ZIP CORAL SPRINGS FL

TITLE STD  
NAME RAHAEL, GEORGE ☐ Delete  
STREET ADDRESS 2900 UNIVERSITY DR  
CITY-ST-ZIP CORAL SPRINGS FL

TITLE VD  
NAME SABGA, ANTOINE ☐ Delete  
STREET ADDRESS 9337 W. SAMPLE RD, S211  
CITY-ST-ZIP CORAL SPRINGS FL

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE V ☐ Change ☒ Addition  
NAME RAHAEL, PAULINE  
STREET ADDRESS 2900 University Drive  
CITY-ST-ZIP Coral Springs, FL 33065

TITLE ☐ Change ☐ Addition  
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:

*George Rahael*

George Rahael, Director

04/05/01

954-753-9500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)