## **2001 UNIFORM BUSINESS REPORT (UBR)**

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## **FILED** Mar 23, 2001 8:00 am Secretary of State DOCUMENT # N15113 1. Entity Name EMERALD OAKS CONDOMINIUM ASSOCIATION, INC. 03-23-2001 90001 038 \*\*\*\*61.25 Principal Place of Business Mailing Address 8211 W. BROWARD BLVD. 8211 W. BROWARD BLVD. PENTHOUSE #1 PENTHOUSE #1 PLANTATION FL 33324 PLANTATION FL 33324 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 Applied For 59-2722406 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name STRALEY, STEPHEN J P.A. Street Address (P.O. Box Number is Not Acceptable) 3990 SHERIDAN STREET SUITE 109 HOLLYWOOD FL 33021 Zip Code 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 \_ DATE Signature, typed or printed name of registered agent and title if applicable. FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. FEE IS \$61.25 Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. PD Change ☐ Addition TITLE TITLE Delete FRANCO, MIKE NAME NAME STREET ADDRESS STREET ADORESS 3431 WATER OAK DRIVE CITY-ST-7IP CITY-ST-ZIP HOLLYWOOD FL 33021 Addition ☐ Change TITLE TITLE LINKHORST, ADAM Janet Michaelson NAME NAME 3414 Water Oaks Drive STREET ADDRESS STREET ADDRESS 3318 OLD OAK LANE CITY-ST-ZIP Hollywood FL CITY-ST-ZIP HOLLYWOOD FL 33021 SD ----TITLE Change Addition TITLE SD ST JAMES, MARIE NAME NAME Ruth Glaser STREET ADDRESS STREET ADDRESS 3503 EMERALD OAKS DRIVE 3511 Emerald Oaks Drive CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33021 H<del>ollywood FL 33021</del> VD ☐ Change ☐ Addition Delete TITLE COSIMI, IVAN NAME NAME STREET ADDRESS 3433 WATER OAK DRIVE STREET ADDRESS CITY-ST-ZIP HOLLYWOOD FL 33021 CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition RICHTER, PERRY NAME STREET ADDRESS 3334 OLD OAK LANE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33021 ☐ Addition ☐ Delete TITLE TITLE FORNO, DICK NAME NAME STREET ADDRESS STREET ADDRESS 3565 ARBOR LANE CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33021 12. I hereby certify that the information supplied with this filine does not qualify to 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 trusted empowered to execute his report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if of the corporation or the receiver or changed, or on an attachment with dress, with all other lik

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Daytime Phone #