

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 29, 2002 8:00 am
Secretary of State

04-29-2002 90194 035 ****61.25

DOCUMENT # N21376

1. Entity Name

WATERSEdge AT THE LAKES OF DELRAY CONDOMINIUM D ASSOCIATION, INC.

Principal Place of Business

Mailing Address

PRIME MANAGEMENT GROUP INC
 6300 PARK OF COMMERCE BLVD.
 BOCA RATON FL 33487-8290

PRIME MANAGEMENT GROUP INC
 6300 PARK OF COMMERCE BLVD.
 BOCA RATON FL 33487-8290
 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

65-0010624

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SWATT, MYRON
PRIME MANAGEMENT GROUP INC
6300 PARK OF COMMERCE BLVD.
BOCA RATON FL 33487

Name

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

City

FL

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

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NISSIM, DANON 5574 WITNEY DRIVE APT 111 DELRAY BCH FL 33484	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	IVP FRIEDMAN, GILDA 5571 WITNEY DRIVE APT 302 DELRAY BCH FL 33484	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD FEIN, CHARLES 5574 WITNEY DR 311 DELRAY BCH FL 33484	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CRAVETZ, BETTY 5574 WITNEY DR, #110 DELRAY BEACH FL 33484	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FINKEL, BOB 5574 WITNEY DR, #202 DELRAY BEACH FL 33484	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	2VP SHELDON SCHIFFMAN 5574 WITNEY DRIVE APT 206 DELRAY BEACH, FL 33484	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ 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.

SIGNATURE: *CHARLES FEIN*

4/12/02 561-495-4611

CR2E037 (9/01)