

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 23, 2002 8:00 am
Secretary of State

04-01-2002 90003 043 ****61.25

DOCUMENT # N21398

1. Entity Name

GARDENS OF SWEETWATER CONDOMINIUM I ASSOCIATION, INC.

Principal Place of Business

18258 COVINA WAY
 APT. #201
 BOCA RATON FL 33498
 US

Mailing Address

18258 COVINA WAY
 APT. #201
 BOCA RATON FL 33498
 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

65-0182595

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

SWERDLOFF, JEWEL
 18258 COVINA WAY
 #201
 BOCA RATON FL 33498

Name **Irene MARGANELLI**
 Street Address (P.O. Box Number is Not Acceptable)
18258 COVINA WAY
#201
 City **BOCA RATON FL** Zip Code **33498**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Irene Marganelli

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

7-10-02

After September 13, 2002,
min. will be \$236.25.

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 **PD** ☐ Delete
 NAME **PERLMAN, GOLDIE**
 STREET ADDRESS **18258 COVINA WAY**
 CITY-ST-ZIP **BOCA RATON FL**

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

TITLE **VPD** ☐ Delete
 NAME **REGAN, KEITH**
 STREET ADDRESS **18258 COVINA WAY**
 CITY-ST-ZIP **BOCA RATON FL**

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

TITLE **TD** ☒ Delete
 NAME **SWERDLOFF, JEWEL**
 STREET ADDRESS **18258 COVINA WAY**
 CITY-ST-ZIP **BOCA RATON FL**

TITLE ☐ Change ☒ Addition
 NAME **TO MARGANELLI Irene**
 STREET ADDRESS **18258 COVINA WAY**
 CITY-ST-ZIP **BOCA RATON FL**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 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:

Irene Marganelli

Irene Marganelli

7-11-02 56487-970

CR2E037 (4/02)



39208

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

April 3, 2002

GARDENS OF SWEETWATER CONDOMINIUM I ASSOCIATION, INC.
18258 COVINA WAY
APT. #201
BOCA RATON, FL 33498 US

Subject: GARDENS OF SWEETWATER CONDOMINIUM I ASSOCIATION, INC.

Reference Number: N21398

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$61.25; however, the report has not been filed and a copy is being returned for the following correction(s):

The new registered agent must sign accepting the designation.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/RG

ANNUAL REPORTS SECTION

The person on document has died. I am now New President. I was just given these documents and am submitting as informed when I called above regarding situation
Rich Russell

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

2002 UNIFORM BUSINESS REPORT (UBR)

4/1/02-90003-043-\$61.25-\$61.25

0076718

DOCUMENT # N21398

1. Entity Name

GARDENS OF SWEETWATER CONDOMINIUM I ASSOCIATION, INC.

Attachment
39208

Principal Place of Business

Mailing Address

18258 COVINA WAY
APT. #201
BOCA RATON FL 33498
US

18258 COVINA WAY
APT. #201
BOCA RATON FL 33498
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

65-0182595

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

Name

Street Address

City

FL

Zip Code

SWERDLOFF, JEWEL
18258 COVINA WAY
#201
BOCA RATON FL 33498

Richard McWhorter SR.
18266 Covina Way #102C
Boca Raton, FL
33498-1545

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PERLMAN, GOLDIE 18258 COVINA WAY BOCA RATON FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD REGAN, KEITH 18258 COVINA WAY BOCA RATON FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SWERDLOFF, JEWEL 18258 COVINA WAY BOCA RATON FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

Jewel Swerdloff
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/26/02

CR2E037 (9/01)