

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2002 8:00 am
Secretary of State

05-16-2002 90031 013 ****61.25

DOCUMENT # N22394

1. Entity Name

THE CRICKET CLUBHOUSE CONDOMINIUM ASSOCIATION, I NC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business 1650 N.E. 115 STREET MIAMI FL 33181 US	Mailing Address 1650 N.E. 115 STREET MIAMI FL 33181 US
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2. Principal Place of Business <input checked="" type="checkbox"/>	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

4. FEI Number 65-0021061	Applied For <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**BECKER & POLIAKOFF, P.A.
5201 LAGOON DRIVE
100
MIAMI FL 33126**

7. Name and Address of New Registered Agent

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 reinstalling) 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 DT	<input type="checkbox"/> Delete
NAME WILLIAMS, RHONDA E	
STREET ADDRESS 1650 NE 115 ST N MIAMI FL	
TITLE DS	<input type="checkbox"/> Delete
NAME BYRNE, JANE	
STREET ADDRESS 1650 NE ST MIAMI FL 33181	
TITLE DVP	<input type="checkbox"/> Delete
NAME ARENA, MARIA	
STREET ADDRESS 1650 NE 115 ST MIAMI FL 33181	
TITLE DP JT	<input type="checkbox"/> Delete
NAME ANTONIO, CHRISTINE	
STREET ADDRESS 1650 NE 115TH STREET #103 MIAMI FL 33181	
TITLE DVP	<input type="checkbox"/> Delete
NAME GONZALEZ, ROBERT	
STREET ADDRESS 1650 NE 115TH STREET 602 MIAMI FL 33181	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE D/T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME TRACY SCHULER	
STREET ADDRESS 1650 NE 115 ST #501 N.M. FL. 33181	
TITLE ALEIDA BEAN	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME S/D	
STREET ADDRESS 1650 NE 115 ST #101 N.M. FL. 33181	
TITLE VP/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME RICARDO AMEROSO	
STREET ADDRESS 1650 NE 115 ST #309 N.M. FL. 33181	
TITLE PRES/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME JAY BOXER	
STREET ADDRESS 1650 NE 115 ST #103 N.M. FL. 33181	
TITLE VP/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME DANNY TRICOCHÉ	
STREET ADDRESS 1650 NE 115 ST #440 N.M. FL. 33181	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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: JAY BOXER **JAY BOXER President** 4/24/02 305 895 0017

CR2E037 (9/01)