

07-18-2003 90074 013 \*\*\*\*61.25

**2003 NOT-FOR-PROFIT CORPORATION  
 UNIFORM BUSINESS REPORT (UBR)**

**DOCUMENT # N26465**

1. Entity Name  
**VILLA SAN REMO CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business      Mailing Address  
 951 BROKEN SOUND PKWY      951 BROKEN SOUND PKWY  
 STE - 250      STE - 250  
 BOCA RATON, FL 33487 US      BOCA RATON, FL 33487 US

90144376



2. Principal Place of Business      3. Mailing Address

State, Apt. #, etc.      State, Apt. #, etc.

City & State      City & State

Zip      Country      Zip      Country

CHECK HERE IF MAKING CHANGES

4. FEI Number      Applied For  
**65-0399835**      Not Applicable

5. Certificate of Status Desired      \$3.75 Additional  
      Fee Required

6. Name and Address of Current Registered Agent      7. Name and Address of First Registered Agent

**ST. JOHN, CORE, FIORE & LEMME, P.A.**  
 500 AUSTRALIAN AVE., SOUTH, STE 600  
 WEST PALM BEACH, FL 33401

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

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

9. Election Campaign Financing Trust Fund Contribution.      \$5.00 May Be Added to Fee

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE PD	LEWIS, HOWARD P. 8840 VIA REAGLE #1 BOCA RATON, FL 33498	TITLE VPD	Donald Dalrymple 8634 Via Reale #3 Boca Raton FL 33496
Delete <input type="checkbox"/>		Delete <input type="checkbox"/>	Change <input checked="" type="checkbox"/> Addition <input checked="" type="checkbox"/>
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 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 the empowered.

SIGNATURE: Janet McCarthy      DATE: \_\_\_\_\_