

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2000 8:00 am
Secretary of State

04-24-2000 90134 009 ****61.25

DOCUMENT # N36113

1. Entity Name

WATERSEdge AT THE LAKES OF DELRAY CONDOMINIUM I

Principal Place of Business

Mailing Address

**PRIME MANAGEMENT GROUP
 BOCA RATON FL 33487
 US**

**6300 PARK OF COMMERCE BLVD
 BOCA RATON FL 33487-8229
 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

65-0307167

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SWATT, MYRON
 PRIME MANAGEMENT GROUP
 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	VPD	<input checked="" type="checkbox"/> Delete
NAME	KAHN, JOSEPH	
STREET ADDRESS	15324 LKS OF DELRAY BLVD 101	
CITY-ST-ZIP	DELRAY BEACH FL 33484	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	RAFF, MELVIN	
STREET ADDRESS	15324 LAKES OF DELRAY BLVD #304	
CITY-ST-ZIP	DELRAY BEACH FL 33484	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	KAZER, IRVING	
STREET ADDRESS	15324 LAKES OF DELRAY BLVD #202	
CITY-ST-ZIP	DELRAY BEACH FL 33484	
TITLE	TD	<input type="checkbox"/> Delete
NAME	BERNSTEIN, SIDNEY	
STREET ADDRESS	15324 LAKES OF DELRAY BLVD #213	
CITY-ST-ZIP	DELRAY BEACH FL 33484	
TITLE	PD	<input type="checkbox"/> Delete
NAME	PERESMIK, MILTON	
STREET ADDRESS	15324 LKS OF DELRAY BLVD 305	
CITY-ST-ZIP	DELRAY BEACH FL 33484	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	VPD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Sommer, Sidney	
STREET ADDRESS	15324 Lakes of Delray Blvd #305	
CITY-ST-ZIP	Delray Bch FL 33484	#211
TITLE	VP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Melvin Raff #304	
STREET ADDRESS	15324 Lakes of Delray	
CITY-ST-ZIP	Delray Beach, FL 33484	
TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Brink, Estelle	
STREET ADDRESS	15324 LAKES OF DELRAY BLVD. #305	
CITY-ST-ZIP	Delray Bch FL 33484	#210
TITLE	TREAS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BERNSTEIN SIDNEY #213	
STREET ADDRESS	15324 LKS. DELRAY BLVD	
CITY-ST-ZIP	Delray Bch FL 33484	
TITLE	Pres.	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PERESMIK, MILTON	
STREET ADDRESS	15324 LKS. DELRAY BLVD. #305	
CITY-ST-ZIP	DELRAY Bch, FL. 33484	
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 607, 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: *Milton Peresmik* **SIGNATURE REQUIRED** *1/20/2000 496-6917*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **MILTON PERESMIK** Date Daytime Phone #

CR2E037 (9/99)