

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 15, 2000 8:00 am
Secretary of State
 03-15-2000 90058 022 ****61.25

DOCUMENT # N37231

1. Entity Name

ANDOVER AT WYCLIFFE CONDOMINIUM ASSOCIATION, INC

Principal Place of Business

Mailing Address

C/O CMD MGMT
 3082 JOG RD
 LAKE WORTH FL 33467
 US

C/O CMD MGMT
 3082 JOG RD
 LAKE WORTH FL 33467-2053
 US

2. Principal Place of Business

C/O Phoenix Mgt.

3. Mailing Address

C/O Phoenix Mgt.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

3082 Jog Road

3082 Jog Road

City & State

City & State

Lake Worth, FL

Lake Worth, FL

Zip

Country

Zip

Country

33467

USA

33467

USA

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROSENTHAL, DAVID C
3082 JOG RD
LAKE WORTH FL 33467

Name

Gabe Hernandez

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

Phoenix Management Services

3082 Jog Road

City

Lake Worth

FL

Zip Code

33467

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]

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

(NOTE: Registered Agent signature required when reinstating)

2/10/00

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 **PD** ☐ Delete
 NAME **PURDY, ED**
 STREET ADDRESS **10267 N. ANDOVER COAH LANE B-1**
 CITY-ST-ZIP **LAKE WORTH FL**

TITLE **D** ☒ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** ☐ Delete
 NAME **RAU, ELLEN**
 STREET ADDRESS **10172 ANDOVER COACH CIRCLE H-2**
 CITY-ST-ZIP **LAKE WORTH FL 33467**

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

TITLE **F** ☐ Delete
 NAME **MARITS, LEWIS**
 STREET ADDRESS **10196 ANDOVER COACH CIR. #2**
 CITY-ST-ZIP **LAKE WORTH FL 33467**

TITLE **TD** ☒ Change ☐ Addition
 NAME **Marks, Lewis**
 STREET ADDRESS **10196 Andover Coach Cir. Unit G-2**
 CITY-ST-ZIP

TITLE **SD** ☐ Delete
 NAME **MORITZ, SEYMOUR**
 STREET ADDRESS **10185 ANDOVER COAH CIRCLE, G-2**
 CITY-ST-ZIP **LAKE WORTH FL**

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

TITLE **D** ☒ Delete
 NAME **HAMMERSLA, ELIJOTT**
 STREET ADDRESS **10303 N. ANDOVER COACH LANE, A-1**
 CITY-ST-ZIP **LAKE WORTH FL**

TITLE **ELIHU BRAUNSTEIN** ☐ Change ☒ Addition
 NAME
 STREET ADDRESS **10185 ANDOVER COACH CIRCLE G-1**
 CITY-ST-ZIP **LAKE WORTH FL**

TITLE **D** ☐ Delete
 NAME **FRANZBLAU, ARTHUR**
 STREET ADDRESS **10172 ANDOVER COACH CIRCLE, G-2**
 CITY-ST-ZIP **LAKE WORTH FL**

TITLE **PD** ☒ 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: *[Signature]*

ARTHUR FRANZBLAU, President

2/10/00 (561) 964-1550

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #