2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 09, 2001 8:00 am
Secretary of State
02-09-2001 90214 044 ****61.25

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DO NOT WRITE IN THIS SPACE

1. Entity Name

DEERING BAY CONDOMINIUM I, INC.

Principal Place of Business	Mailing Address
13605 OLD CUTLER RD MIAMI FL 33158-1334	13605 OLD CUTLER RD MIAMI FL 33158-1334

2. Principal Place of Business	3. Mailing Address
13610 Deering Bay Dr.	13610 Deering Bay Dr
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Coral Gables, FL	City & State: Coral Gables, FL
Zip: 33158 Country: USA	Zip: 33158 Country: USA

4. FEI Number 65-0427488 ☐ 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
MICHAEL D. KATZ, ESQ. KATZ, BARRON, SQUITERO, FAUST & BERMAN PA 2699 S. BAYSHORE DR., 7TH FLOOR MIAMI FL 33133	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 / NAME / STREET ADDRESS / CITY-ST-ZIP	DT WHITCOMB, STANLEY P. 13605 DEERING, BAY DR. CORAL GABLES FL 33158	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV Kraslow, David 13610 Deering Bay Dr. Coral Gables, FL 33158	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD SUAREZ, ROBERTO 13610 DEERING BAY DR. CORAL GABLES FL 33158	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT Stewart, Pat 13610 Deering Bay Drive Coral Gables, FL 33158	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD STERWART, PAT 13610 DEERING BAY DR. CORAL GABLES FL 33158	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS Wilkins, Karen 13610 Deering Bay Dr. Coral Gables, FL 33158	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT BERNKRANT, ALLEN 13610 DEERING BAY DR. CORAL GABLES FL 33158	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP Bernkrant, Allen 13610 Deering Bay Dr. Coral Gables, FL 33158	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD KALSTONE, FERNE 13610 DEERING BAY DR. CORAL GABLES FL 33158	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Messett, Bill 13610 Deering Bay Dr. Coral Gables FL 33158	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/00)

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 REQUIRED 1/9/01 305-252-0544
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #