

# 2002 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 29, 2002 8:00 am  
Secretary of State

04-29-2002 90180 010 \*\*\*\*61.25

DOCUMENT # N94000000656

1. Entity Name

ILLUSTRE VILLAGE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

C/O PRIME MANAGEMENT GROUP  
6300 PARK & COMMERCE BLVD.  
BOCA RATON FL 33487  
US

C/O PRIME MANAGEMENT GROUP  
6300 PARK & COMMERCE BLVD.  
BOCA RATON FL 33487  
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

65-0562405

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

SWATT, MYRON  
C/O PRIME MANAGEMENT GROUP  
6300 PARK & 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 PD ☒ Delete  
NAME MARTONE, ROBERT  
STREET ADDRESS 5135 A FLORIDA DRIVE  
CITY-ST-ZIP BOYNTON BEACH FL 33437

TITLE PD ☐ Change ☒ Addition  
NAME MACALUSO, SALVATORE  
STREET ADDRESS 5265 L BRISATA CIR.  
CITY-ST-ZIP BOYNTON BEACH, FL 33437

TITLE T ☐ Delete  
NAME RICHER, JERRY  
STREET ADDRESS 5136 C FLORIDA DRIVE  
CITY-ST-ZIP BOYNTON BEACH FL 33437

TITLE D ☐ Change ☒ Addition  
NAME Poppedisano, Bridget  
STREET ADDRESS 5171 J FLORIDA DR.  
CITY-ST-ZIP BOYNTON BEACH, FL 33437

TITLE SD ☒ Delete  
NAME MARTONE, NORMA  
STREET ADDRESS 5135 A FLORIDA DR  
CITY-ST-ZIP BOYNTON BEACH FL 33437

TITLE D ☐ Change ☒ Addition  
NAME Apter, Selma  
STREET ADDRESS 5265 P BRISATA CIR.  
CITY-ST-ZIP BOYNTON BEACH, FL 33437

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE YPA ☐ Change ☒ Addition  
NAME HOFFMAN, BENJAMIN  
STREET ADDRESS 5153 C FLORIDA DRIVE  
CITY-ST-ZIP BOYNTON BEACH, FL 33437

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/02 (561) 374-9575

Date

Daytime Phone #

CR2E037 (9/01)