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

## DOCUMENT # N9400005982

1. Entity Name

## PRINCETON CONDOMINIUM ASSOCIATION, INC.



## FILED Apr 23, 2003 8:00 am Secretary of State

04-23-2003 90265 037 \*\*\*\*61.25

| ******New Address****** Sterling Management 1701-B Rickenbacker Drive Sun City Center, FL 33573   |  |  | ******New Address****** Sterling Management 1701-B Rickenbacker Drive Sun City Center, FL 33573 |                                       |                                       |   |  |                          | - \<br>- \<br>- Dir Ann Ann Ann Ann | 1911 <b>8</b> 11 <b>9</b> 1 18 <b>9</b> 1 |
|---|--|--|---|---------------------------------------|---------------------------------------|---|--|--------------------------|-------------------------------------|---|
| 2. Principal Place of Business  |  |  | 3. Mailing Address  |                                       |                                       |   |  |                          |                                     |   |
| Suite, Apt. #, etc.   |  |  | Suite, Apt. #, etc.   |                                       |                                       |   | CHECK HERE IF MAKING CHANGES   |                          |                                     |   |
| City & State  |  |  | City & State  |                                       |                                       |   | 4. FEI Number 59-3294461   |                          |                                     | Applied For<br>lot Applicable             |
| Zip Country   |  |  | Zi  | р                                     | , Country                             | 5. Certificate of Sta   |  | tatus Desired            | \$8.75 Ac                           |   |
| 6. Name and Address of Current Registered Agent   |  |  |   |                                       |                                       |   | 7. Name and Add  | iress of New Registe     | ered Agent                          |   |
| BECKER & POLIAKOFF, P.A. 2401 WEST BAY DRIVE SUITE 414 LARGO FL 33770   |  |  |   |                                       | Street                                | James R. De Furio, Esquire 101 E. Kennedy Blvd., Suite 1030 Tampa, FL 33602 |  |                          |                                     |   |
| 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  Signature, typed or printed name of registered agent and title if applicable. (NOTE-Registered Agent signature required when reinstating)  DATE |  |  |   |                                       |                                       |   |  |                          |                                     |   |
|   | Signature typed i  | or printed fiame of registered ager              | и алоше пар   | olicable. (NOTS                       | Registered Agent signa                | sture required  | when reinstating)  |                          | DATE                                |   |
| FILE NOW: FEE IS \$61.25  9. Election Camp Trust Fund Cor   |  |  |   |                                       |                                       | □   | \$5.00 May Be Added to Fees  Make Check Payable to Florida Department of State |                          |                                     |   |
| 10.   | 00   | OFFICERS AND D                                   | IRECTORS  |                                       | 11.                                   |   | ADDITIONS/CHANG  | ES TO OFFICERS AN        | ID DIRECTORS I                      |   |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   | 524 PRINC  | , WILLIAM E<br>ETON GREENS CT<br>CENTER FL 33573 |   | □ Oelete                              | TITLE NAME STREET ADDRESS CITY-ST-ZIP | VD<br>Ander<br>544<br>Sun (   | son, Marilyr<br>Princeton G<br>City Center, F                                  | l<br>reens Dr.<br>L33573 | ☐ Change                            | Addition                                  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   |  | ARL<br>ETON GREENS CT<br>CENTER FL 33573         |   | Delete                                | TITLE NAME STREET ADDRESS CITY-ST-ZIP | SmH<br>542  | n,George<br>Princeton Gi<br>City Center  | eens Dr.                 | Change                              | Addition                                  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   | TD HECKEL, WILLIAM 507 PRINCETON GREENS COURT SUN CITY CENTER FL 33573 |  |   |                                       | TITLE NAME STREET ADDRESS CITY-ST-ZIP | SEW SE  | is, Kay<br>Princton G<br>City Center, 1  | reens Dr                 | ☐ Change                            | Addition                                  |
| TITLE NAME STREET ADORESS CITY-ST-ZIP   | SO HALL, GEORGE 515 PRINCETON GREENS COURT SUN CITY CENTER FL 33573    |  |   | TITLE NAME STREET ADDRESS CITY-ST-ZIP | 11)                                   | George Jr.<br>Princet on Gre<br>Lity Center,                                |  | ☐ Change                 | Addition                            |   |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   | D<br>LEWIS, KA<br>545 PRINC  |  |   | Delete                                | TITLE NAME STREET ADDRESS CITY-ST-ZIP |   |  |                          | ☐ Change                            | ☐ Addition                                |
| TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  |  |  |   | □ Delete                              | TITLE NAME STREET ADDRESS CITY-ST-ZIP |   |  |                          | ☐ Change                            | Addition                                  |

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

William KYtantonanuirez 76-03

813-6340774