2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N9500002137

1. Entity Name

THE NANTUCKET COVE TOWNHOMES CONDOMINIUM ASSOCIATION, INC.

Principal Place of Busine	ess	Mailing Address			
7016 SW 48TH LANE MIAMI FL 33155 US		7016 SW 48TH LANE MIAMI FL 33155 US	N _e		
2. Principal Place of Bus	iness	3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State	•		
Zip	Country	Zip	Country		

FILED May 03, 2002 8:00 am Secretary of State

05-03-2002 90058 001 *****8.75 05-03-2002 90058 002 ****61.25



DO NOT WRITE IN THIS SPACE

			1								
City & State		City & S	City & State			4. FEI Number NOT APPLICABLE			Applied For		
Zip	Country Zig		Zip	Country		5. Certificate of Status Desired		\$8.75 A	Not Applicable 8.75 Additional		
6. Name and Address of Current Registered				d Agent			7. Name and Address of New Registered Agent				
			inegrater ed Ag	ent	Nam	e	7. Name and Add	ress of New Reg	istered Agent		4
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CALDWELL, J. ALEXANDER					Stree	et Address	(P.O. Box Number is N	Not Acceptable)			7
	48TH LANE						-		.		\dashv
MIAMI FL	33155										
					City				FL Zip Co	de	
8. The above	e named entity	y submits this statement for	the purpose o	f changing its r	egistered office	e or registe	red agent, or both, in	the state of Florida			-
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SIGNATURE		or printed name of registered agent a	nd title it applicable	/NOTE:	Danistana di Assista						1
		or printed marile of registered agent a	по ше п аррікавіе.	(NOTE:	Registered Agent sig	gnature require	d when reinstating)		DATE		
7			_								7
FILE NOW: FEE IS \$61.25			9.	9. Election Campaign Financing Trust Fund Contribution.			\$5.00 May Be	Make	Check Payable	∍ to	
				Hust Fund Co	minibution.		Added to Fees	Dep	artment of Stat	le	
10.		OFFICERS AND DIR	ECTORS		11.		ADDITIONS (CLIANGE	O TO OFFICERS			_
TITLE	PD			☐ Delete	TITLE	-	ADDITIONS/CHANGE	S TO OFFICERS			┨╸
NAME	SMITH, TO	DD B	Ĺ	Delete	NAME				☐ Change	☐ Addition	0,0
STREET ADDRESS	3263 GIFF(STREET ADDRES	s					100
CITY-ST-ZIP	MIAMI FL 3				CITY-ST-ZIP						CR2E037 (9/01
TITLE	STD			 ☐ Delete	TITLE	 -					┦낊
NAME	CALDWELL	, J. Alexander	_		NÁME				☐ Change	☐ Addition	ျပ
STREET ADDRESS	7016 SW 4	8TH LANE			STREET ADDRES	s					
CITY-ST-ZIP	MIAMI FL 3	3155			CITY-ST-ZIP						l
TITLE	VPD	-		Delete	TITLE		٠,	·	☐ Change	☐ Addition	1
-NAME	KAYE, ANG				-NAME	_	<u></u>				_
	7016 SW 4				STREET ADDRES	s					
	MIAMI FL 3	3155	<u> </u>		* CITY-ST-ZIP						
TITLE 3				☐ Delete	TITLE				☐ Change	Addition	-
NAME STREET ADDRESS					NAME				_	_	
CITY-ST-ZIP				-	STREET ADDRESS	S					ĺ
		· · · · · · · · · · · · · · · · · · ·			CITY-ST-ZIP						
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					CITY-ST-ZIP	 					
TITLE NAME] Delete	TITLE				☐ Change	☐ Addition	
STREET ADDRESS					NAME					-	
CITY-ST-ZIP				_	STREET ADDRESS CITY-ST-ZIP	1					
	ertify that the	information opposited with at	is filles -1	-A 107 - 7 - 11		<u> </u>					
indicated of the corr	on this report	information supplied with the or supplemental report is the receiver or trustee empoyer.	ue and accura	te and that my	e exemption st signature shall	ated in Sec have the s	ction 119.07(3)(i), Flori ame legal effect as if r	da Statutes. I furth nade under oath;	ner certify that the in that I am an officer	nformation or director	

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

SIGNATURE:

CONSTURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ja 10/ 11/02

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