

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 12, 2002 8:00 am**  
**Secretary of State**

04-01-2002 90728 045 \*\*\*\*61.25  
 08-12-2002 90004 014 \*\*\*\*61.25

**DOCUMENT # N96000006065**

1. Entity Name

**RVS-ORLANDO CONDOMINIUM ASSOCIATION, INC.**

Principal Place of Business

Mailing Address

**4310 PARADISE ROAD  
 LAS VEGAS NV 89109**

**4310 PARADISE ROAD  
 LAS VEGAS NV 89109**

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

**86-0855260**

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

**C T CORPORATION SYSTEM  
 1200 SOUTH PINE ISLAND ROAD  
 PLANTATION FL 33324**

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. 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

**After September 13, 2002,  
 min. will be \$236.25.**

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  
**PD  
 MCMURTRIE, GREGG A  
 4310 PARADISE ROAD  
 LAS VEGAS NV 89109** ☒ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**PRESIDENT  
 DIANE STEENMAN  
 4310 PARADISE RD  
 LAS VEGAS NV 89109** ☒ Change ☒ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**TD  
 BALTUSKONIS, CHARLES G  
 4310 PARADISE ROAD  
 LAS VEGAS NV 89109** ☒ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**VPTREASURER  
 LEO FAWERTY  
 2642 SHANNON ST  
 ORANGE PARK, FL 32065** ☒ Change ☒ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**VPSD  
 MCELROY, VICTOR A  
 4310 PARADISE ROAD  
 LAS VEGAS NV 89109** ☐ Delete

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

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Delete

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

TITLE  
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 CITY-ST-ZIP  
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 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)(j), 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:

*Diane Steenman*

8/8/02

(702) 737-3700

CR2E037 (4/02)