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

FILED
May 01, 2003 8:00 am
Secretary of State
05-01-2003 90209 004 ****61.25

DOCUMENT # N98000004077

1. Entity Name
SIERRA RIDGE CONDOMINIUM K ASSOCIATION, INC.

Principal Place of Business	Mailing Address
THE CONTINENTAL GROUP 2950 N. 28TH TERRACE HOLLYWOOD FL 33020	THE CONTINENTAL GROUP 2950 N. 28TH TERRACE HOLLYWOOD FL 33020

☐ CHECK HERE IF MAKING CHANGES

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 65-0849796 ☐ 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
STANTON, RICHARD 80 S.W. 8TH STSREET #2804 MIAMI FL 33130	Name: STANTON, RICHARD Street Address (P.O. Box Number is Not Acceptable): TWO ALHAMBRA PLAZA, SUITE 508 City: CORAL GABLES FL Zip Code: 33134

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MOHAMMED, RENA 850 N.E. 212TH TERRACE #4 N. MIAMI BEACH FL 33179	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD BUTTENDORF, RUTH 850 N.E. 212TH TERRACE, #1 N. MIAMI BEACH FL 33179	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD GUERRIER, BARBARA 840 NE 212 TERR #6 N MIAMI BEACH, FL 33179	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD AVHAD, VIRGILIA 840 N.E. 212TH TERRACE, #1 N. MIAMI BEACH FL 33179	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD AVHAD, VIRGILIA 840 NE 212 TERR #1 NORTH MIAMI BEACH, FL 33179	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ 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
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/02)

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 President 4/24/03 3057259515