2000 UNIFORM BUSINESS REPORT (UBR)

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THE PALMS 2100 MASTER ASSOCIATION, INC.							, ~ *	0.5		FIL		
Principal Place of Business Mailing Address									00 JI	UN 27	PM 5: 1	16
2100 N OCEA FT LAUDERDA			2100 N OCEAN BLVD FT LAUDERDALE FL 33305	2100 N OCEAN BLVD FT LAUDERDALE FL 33305-1916					SECR. TALLA	ETARY HASSE	OF STATE, FLORI	FE Da
2. Principal	Place of Busin	ness	3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE					
City & State			City & State			4. FEI Numbe	65-0862163		<u> </u>	oplied For ot Applicable	F.	
Zip Country			Ζip	Cou	untry		5. Certificate	of Status Desired	П :	\$8.75 Ad	ditional	1
	6. Name	and Address of Current	Registered Agent				7. Name and Address of New Registered Agent					
				· · · · · · · · · · · · · · · · · · ·								
WISH, JERROLD 1221 BRICKELL AVE MIAMI FL 33131					Street /	Street Address (P.O. Box Number is Not Acceptable) City						
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a. The MOOVE	a uamec euniú	submits this statement to	the purpose of changing its	egistere	ed office o	or registers	ed agent, or both	i, in the state of Flo	ida.			1
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SIGNATURE)
	Signature, typed	or printed name of registered agent a	ind title if applicable. (NOTE:	Registere	angia megA b	ture required	when reinstating)		DATE			ì
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	FILE	NOW:	9. Election Campaign		ng _	\$5.0	May Be	Make	Check P	ayable to	•	1
	FEE IS	\$61.25	Trust Fund Contribu	tion.	~~ El	bebba	to Fees		artment'			
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12. I hereby o	ertify that the	information supplied with t	his diing does not avallity for t	ho over	antice -t-					to the a the a the	former:	ĺ
indicated	on this report	or supplemental report is t	his/iling does not qualify for t true and accurate and that my veled to execute this report as	rsignatı	ire shall h	ave the sa	ਕਰਜ । 19.07(3)(1), ame legal effect :	rionua Statutes. I as il made under or	ormer cerui th; that I am	y inat t ne in 1 an officer i	or director	1
of the corr	poration of the	receiver or trustee empoy	vered to execute this report as	s require	ed by Cha	pter 617,	Florida Statutes;	and that my name	appears in E	Block 10 or	Block 11 if	1
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SIGNATURE SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR DIRECTO												}
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