

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2001 8:00 am
Secretary of State

04-30-2001 90139 007 ****61.25

DOCUMENT # N98000006896

1. Entity Name

410 WILMA ASSOCIATION, INC.

Principal Place of Business

**410 WILMA CIRCLE
 RIVIERA BEACH FL 33404**

Mailing Address

**410 WILMA CIRCLE
 RIVIERA BEACH FL 33404**

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

65-0929816

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

**LEVINE, JAY STEVEN PA
 2500 NORTH MILITARY TR
 #275
 BOCA RATON FL 33431**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
 FEE IS \$61.25**

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 PD
 NAME GORMAN, WILLIAM P
 STREET ADDRESS 2936 LAKESHORE DR., #403
 CITY-ST-ZIP RIVIERA BEACH FL 33404 ☐ Delete

TITLE PD
 NAME CHRISTOPH, STEPHANIE ☒ Change ☐ Addition
 STREET ADDRESS 410 WILMA CIR #308
 CITY-ST-ZIP RIVIERA BEACH, FL 33404

TITLE TD
 NAME BLAINEY, WILLIAM J ☒ Delete
 STREET ADDRESS 2936 LAKESHORE DR., #308
 CITY-ST-ZIP RIVIERA BEACH FL 33404

TITLE TD
 NAME GORMAN, WILLIAM P. ☒ Change ☐ Addition
 STREET ADDRESS 2936 LAKESHORE DR #403
 CITY-ST-ZIP RIVIERA BEACH, FL 33404

TITLE VD
 NAME CHRISTOPH, STEPHANIE ☐ Delete
 STREET ADDRESS 410 WILMA CIR
 CITY-ST-ZIP RIVIERA BEACH FL

TITLE VD
 NAME DONOHUE, BETTY ☐ Change ☒ Addition
 STREET ADDRESS 2936 LAKESHORE DR #201
 CITY-ST-ZIP RIVIERA BEACH, FL 33404

TITLE SD
 NAME HOPKINS, SHIRLEY K ☐ Delete
 STREET ADDRESS 410 WILMA CIR #401
 CITY-ST-ZIP RIVIERA BEACH FL 33404

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

TITLE D
 NAME LADE, WILLIAM K ☒ Delete
 STREET ADDRESS 400 WILMA CIRCLE, #110
 CITY-ST-ZIP RIVIERA BEACH FL 33404

TITLE D
 NAME PRICE, JAMIE ☐ Change ☒ Addition
 STREET ADDRESS 400 WILMA CIR #301
 CITY-ST-ZIP RIVIERA BEACH, FL 33404

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

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:

Stephanie Christoph (561) 4/23/01 863-6320
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)