

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 18, 2002 8:00 am**  
**Secretary of State**

04-18-2002 90370 017 \*\*\*\*61.25

**DOCUMENT # N99000002078**

1. Entity Name

**THE MARK-LENA CENTRE CONDOMINIUM ASSOCIATION, IN C.**

Principal Place of Business

Mailing Address

1717 20TH STREET STE. 105  
 VERO BEACH FL 32960

1717 20TH STREET STE. 105  
 VERO BEACH FL 32960

2. Principal Place of Business

3. Mailing Address

1105 12th Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Vero Beach, FL

4. FEI Number

65-0963905

Applied For

Not Applicable

Zip

Country

Zip

Country

32960 USA

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

TAYLOR, JAMES A III  
 5070 NORTH HIGHWAY A-1-A STE. 200  
 VERO BEACH FL 32963

Name

Karen L. Merrill

Street Address (P.O. Box Number is Not Acceptable)

1105 12th Street

City

Vero Beach

FL

Zip Code

32960

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

Karen L. Merrill

1/8/02

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 ☐ Delete  
 NAME D  
 STREET ADDRESS WALLACH, KURT L  
 CITY-ST-ZIP 1717 20TH STREET STE. 105  
 VERO BEACH FL 32960

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

TITLE ☐ Delete  
 NAME D  
 STREET ADDRESS WALLACH, MARILYN G  
 CITY-ST-ZIP 1717 20TH STREET STE. 105  
 VERO BEACH FL 32960

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

TITLE ☐ Delete  
 NAME D  
 STREET ADDRESS WATTLES, REGINA M  
 CITY-ST-ZIP 1717 20TH STREET STE. 105  
 VERO BEACH FL 32960

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

TITLE ☐ Delete  
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 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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TITLE ☐ Delete  
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TITLE ☐ Delete  
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 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/14/02

CR2E037 (9/01)