2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

P01000045436 **DOCUMENT #**

1. Entity Name

TOR-PALMS TOWNHOUSE ASSOCIATION, INC.



2. Principal Place of Business



Mailing Address

3. Mailing Address

3217 NE 13TH STREET UNIT 101 POMPANO BEACH FL 33062

3217-	-3225 N.L. 13 ST	3470 NI	<u> </u>	74		
Suite, Apt.		Suite, Apt. #, etc. # 2.0 -1			CHECK HERE IF MAKING CHANGES	
	ano Beach, Fl.	Panjana De	ach, Fl.		4. FEI Number NOT APPLICABLE Applied For Not Applicable	
<u>ゝゝゝ。</u>		33062	US A		5. Certificate of Status Desired See Required \$8.75 Additional Fee Required	
	6. Name and Address of Current F	legistered Agent	Name		7. Name and Address of New Registered Agent	
LEGEL, LARRY 5100 N FEDERAL HWT STE 409 FT LAUDERDALE FL 33308				Street Address (P.O. Box Number is Not Acceptable)		
			City		FL Zip Code	
	named entity submits this statement for ions of registered agent.	the purpose of changing its re	egistered office	or register	ered agent, or both, in the State of Florida. I am familiar with, and accept	
SIGNATURE .	Signature, typed or printed name of registered agent are	nd title if applicable. (NOTE:	Registered Agent sign	nature required	d when reinstating) DATE	
Afte	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 k Rayable to Florida Department of				9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees	
10.	OFFICERS AND D		11.	1	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP WINSTON, ROBERT M P.O. BOX 11640 FT LAUDERDALE FL 33339	Delete Oelete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	sh.	exident prinary (Addition alley Cyclelman 25 NE 13th st. #202 cmpans Black, F1. 33062	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	1 1	mc is medomald secretary Change PAddition 17 NB 13th St & 102 mpans Beach Cl. 33062	
TITLE NAME STREET ADORESS: CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2322	ce-President Change PAddition phone Pacta # 204 mpon Breach F1. 33062	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CHY-ST-ZIP	1323 323	company Beach H. 33062	
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	
indicated of the cor	on this report or supplemental report is t	rue and accurate and that my vered to execute this report as	he exemption signature shall	have the s	ection 119.07(3)(i), Florida Statutes. I further certify that the information same legal effect as if made under oath; that I am an officer or director 7, Florida Statutes; and that my name appears in Block 10 or Block 11 if	

FILED

05-05-2003 91759 011 ***150.00

May 05, 2003 8:00 am § Secretary of State