

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000054079

1. Entity Name

CAUSEWAY BRIDGE PROPERTY, INC.

**FILED**  
**May 03, 2001 8:00 am**  
**Secretary of State**

05-03-2001 90088 016 \*\*\*150.00

Principal Place of Business

ONE SE 3RD AVENUE 28TH FLOOR  
MIAMI FL 33131

Mailing Address

ONE SE 3RD AVENUE 28TH FLOOR  
MIAMI FL 33131

2. Principal Place of Business

501 E. Camino Real

Suite, Apt. #, etc.  
Corporate Offices

3. Mailing Address

P. O. Box 5025

Suite, Apt. #, etc.  
Corporate Offices

City & State

Boca Raton, FL

City & State

Boca Raton, FL

Zip

33432

Country

Zip

33431

Country

4. FEI Number

DO NOT WRITE IN THIS SPACE  
65-0929406

~~APPLIED FOR~~

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

AMERICAN INFORMATION SERVICES, INC.  
ONE SE 3RD AVENUE 28TH FLOOR  
MIAMI FL 33131

7. Name and Address of New Registered Agent

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

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete  
NAME S  
STREET ADDRESS HANDLEY, RICHARD L  
CITY-ST-ZIP C/O ONE S.E. 3RD AVENUE, 28TH FLOOR  
MIAMI FL 33131

TITLE ☐ Delete  
NAME DP  
STREET ADDRESS PIERCE, WILLIAM M  
CITY-ST-ZIP C/O ONE S.E. 3RD AVENUE, 28TH FLOOR  
MIAMI FL 33131

TITLE ☐ Delete  
NAME VP  
STREET ADDRESS STIRK, ROBERT J  
CITY-ST-ZIP C/O ONE S.E. 3RD AVENUE, 28TH FLOOR  
MIAMI FL 33131

TITLE ☐ Delete  
NAME T  
STREET ADDRESS DAURIA, STEVEN  
CITY-ST-ZIP C/O ONE S.E. 3RD AVENUE, 28TH FLOOR  
MIAMI FL 33131

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 450 E. Las Olas Blvd., #1500  
CITY-ST-ZIP Ft. Lauderdale, FL 33301

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 501 E. Camino Real  
CITY-ST-ZIP Boca Raton, FL 33432

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 501 E. Camino Real  
CITY-ST-ZIP Boca Raton, FL 33432

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 501 E. Camino Real  
CITY-ST-ZIP Boca Raton, FL 33432

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

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

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Steven M. Dauria

4/26/01

561-447-5300

Date

Daytime Phone #

0151754

CR2E034 (10/00)