2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT#718482

FILED Apr 29, 2003 Secretary of State

Entity Name: BREAKERS OF FT. LAUDERDALE CONDOMINUIM ASSOCIATION, INC.

Current Pr	incipal Place of Busine	ss:	New Prince	ipal Place of Business:	
909 BREAK FT.LAUDEI	KERS AVE. RDALE, FL 33304 US				
Current Mailing Address:			New Maili	New Mailing Address:	
12179 S APOPKA-VINELAND RD #607 ORLANDO, FL 32836 US			271 CROCKETT BLVB MERRITT ISLAND, FL 32953 US		
FEI Number:	59-2454526 FEI Numbe	er Applied For()	FEI Number Not App	licable () Certificate of Status Desired ()	
Name and	Address of Current Reg	istered Agent:	Name and	Address of New Registered Agent:	
FT. LAUDE The above in the State	OLAS BLVD., STE. 1440 RDALE, FL 33301 US named entity submits this of Florida.	8	irpose of changing i	ts registered office or registered agent, or bo	th,
SIGNATUR		e of Registered Ager	h	Date	_
OFFICEDS	-	e of Registered Ager			OBC.
OFFICERS	AND DIRECTORS:		ADDITION	IS/CHANGES TO OFFICERS AND DIRECT	OKS:
Title: Name: Address: City-St-Zip:	P () Delete WNUKOWSKI, RON 4101 HAGGERTY ROAD WEST BLOOMFIELD, MI 48:	323	Title: Name: Address: City-St-Zip:	D (X) Change () Addition WNUKOWSKI, RON 4101 HAGGERTY ROAD WEST BLOOMFIELD, MI 48323	
Title: Name: Address: City-St-Zip:	V () Delete FROMER, KEN 325 EAST AURORA AVENUE VENICE, FL 34285		Title: Name: Address: City-St-Zip:	P (X) Change () Addition FROMER, KEN 325 EAST AURORA AVENUE VENICE, FL 34285	
Title: Name: Address: City-St-Zip:	ST () Delete MCLEON, KEITH 2824 SEITER DR NAPERVILLE, IL 60565		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete LEWELLYN, JOHN 150 EREAN STREET MONTROSE, MI 48457		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete SPENCER, DELOS 704 EAST PERKINS STREET MEDFORD, WI 544511917		Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KEN FROMER P 04/29/2003