

Condominium AOUO - Online Reregistration Filing

1. Project Registration

Project Number: **44**

Name of Condominium Project: **CONTINENTAL APARTMENTS THE**

Project Street Address: **909-933 KAHEKA ST**

Total # Units: **71**

Expiration of bond on file with Commission: **12/31/9999**

ASSOCIATION INFORMATION

2.

a. List the names of the officers of the association: (All information provided is public information)

President (*required*): Last Name **HASHIMOTO** First Name **COREY**

V. President (*opt*): Last Name **WERNER** First Name **CATHY**

Secretary (*required*): Last Name **HUNG** First Name **JOHN**

Treasurer (*required*): Last Name **HUNG** First Name **JOHN**

b. Designated officer (from section 2a) for direct contact (required):

The Hawaii Condominium Bulletin is mailed to this person for distribution.

Title: **PRESIDENT** Last Name: **HASHIMOTO** First Name: **COREY**

Officer's Mailing Address(public): **1538 ALA AMOAMO ST.**

(Abbreviate Street (ST), Avenue (AVE), Homestead (HMSTD), Parkway (PKWY), etc. No Punctuation Please)

City: **HONOLULU** State: **HI** Zip Code: **96819**

Day Phone: (e.g. 8081234567) **8082866123** Public Email: (*optional*)

3.

a. Person to Receive AOUO Correspondence & Calls from Commission (required):

Individual to receive notices to update fidelity bond coverage, as well as correspondence (except the Hawaii Condominium Bulletin and broader educational materials) and calls from the Commission.

Title: **MGMT EXECUTIVE** Last Name: **ACOBA-SUGANUMA** First Name: **JODEE**

Mailing Address: **711 KAPIOLANI BLVD #700**

(Abbreviate Street (ST), Avenue (AVE), Homestead (HMSTD), Parkway (PKWY), etc. No Punctuation Please)

City: **HONOLULU** State: **HI** Zip Code: **96813**

Day Phone: (e.g. 8081234567) **8085936343** Public Email: (*optional*)

b. Pursuant to Act 158, Session Laws of Hawaii 2009, please identify the individual designated to provide reasonable access to persons authorized to serve civil process, in compliance with Chapter 634, Hawaii Revised Statutes.

Name: **EDWARD KUHNS**

4. Management Status (*required*): (see [Instructions](#))

Self Managed by Association of Unit Owners **No**

Title: Last Name: First Name:

Mailing Address:

(Abbreviate Street (ST), Avenue (AVE), Homestead (HMSTD), Parkway (PKWY), etc. No Punctuation Please)

City: State: Zip Code:

Day Phone: (e.g. 8081234567) **Public** Email: (*optional*)

Managed by Condominium Managing Agent **Yes**
Management Company: **HAWAIIANA MGMT CO LTD**
Mailing Address: **711 KAPIOLANI BLVD #700**
(Abbreviate Street (ST), Avenue (AVE), Homestead (HMSTD), Parkway (PKWY), etc. No Punctuation Please)
City: **HONOLULU** State: **HI** Zip Code: **96813**
Day Phone: (e.g. 8081234567) **8085939100** Public Email: (optional)

BOND INFORMATION

5. Fidelity Bond Exemption:

An AOOU that is unable to obtain a fidelity bond may seek approval for a bond exemption from the Commission (HRS §514A-95.1(a)(1)). Select which type of exemption the AOOU is requesting. The AOOU may submit only ONE type of bond exemption if the AOOU meets all the conditions and terms stated on the application. An additional \$50 nonrefundable bond exemption application fee will be added to the total amount due. If the bond exemption is denied, then the AOOU must submit evidence of current fidelity bonding no later than the May 31, 2011 reregistration deadline. All fidelity bond exemptions expire at the conclusion of the biennial registration period, shall be reapplied for each biennial registration period, and shall be submitted at least 30 days prior to the biennial registration deadline. ([Requirements](#))

- **No exemption Requested**

FEE AND ASSESSMENTS

6. Owner occupancy:

Percentage of residential use units in the project which are owner-occupied **54%**.

7. Annual operating budget:

Did the AOOU board of directors adopt an annual operating budget? **Yes**

If yes, is it distributed to each unit owner? **Yes**

8. Maintenance fees: (see [Instructions](#))

- State the lowest and highest MONTHLY maintenance fees assessed for any unit.
Lowest per month: **\$385.00** Highest per month: **\$385.00**
- Has there been an increase in maintenance fees in the last two years? **Yes**
- What is the AOOU's total amount of current DELINQUENT maintenance fees over 90 days? **\$0.00**

9. Special assessments:

- Were special assessments levied against the owners within the last two years? **No**
If yes, how much per unit? \$
If yes, for what purpose?
- Is there any plan to collect a special assessment in the near future? **No**
If yes, when?(mm/dd/yyyy) How much per unit? \$
If yes, for what purpose?

OTHER INFORMATION

10. Reserve studies and replacement reserves: (see [Instructions](#))

- Has the AOOU conducted a reserve study? **Yes**
- Has the AOOU adopted an annual operating budget for replacement reserves? **Yes**

- c. Is the AOOU funding a minimum of fifty percent of the estimated replacement reserves OR one hundred percent of the estimated replacement reserves when using a cash flow plan? **Yes**
- d. Has the AOOU funded replacement reserves through special assessment? **No**
- e. Has the AOOU exceeded its annual operating budget during anytime in the last two fiscal years? **No**
If yes, where did the Association find the monies for the extra expenses? From Reserves
From Special Assessments
From a Combination of Reserves/Assessments
Increased Maintenance Fees
Loan
- f. Where are the reserves deposited/invested? Select all that apply.
Deposited in a financial institution, including a federal or community credit union, located in the State and whose deposits are insured by an agency of the United States government; **Yes**
Held by a corporation authorized to do business under article 8 of chapter 412;
Held by the United States Treasury; or
Purchased in the name of and held for the benefit of the association through a securities broker that is registered with the Securities and Exchange Commission, that has an office in the State, and the accounts of which are held by member firms of the New York Stock Exchange or National Association of Securities Dealers and insured by the Securities Insurance Protection Corporation.
Demand deposits, investment certificates, savings accounts, and certificates of deposit;
Obligations of the United States government, the State of Hawaii, or their respective agencies;
Mutual funds comprised solely of investments in the obligations of the United States government, the State of Hawaii, or their respective agencies;
Out of state institution.

11. Audit Information:

Does the AOOU conduct an annual financial audit of AOOU funds by a public accountant? **Yes**

12. Pet Prohibition:

- a. Does the AOOU prohibit pets? **Yes**
- b. If yes, are pet prohibitions stated in the recorded bylaws? **Yes**

13. Does your AOOU maintain and make available for owner-review during reasonable hours a reference binder containing the Hawaii Condominium Bulletin, Board of Directors Guides, Real Estate Commission brochures, HRS Chapter 514A, HRS Chapter 514B, HAR Chapter 107, copies of the declaration, bylaws, house rules, and any amendments? **Yes**

14.

- a. Has the AOOU made any changes to the common elements within the last two years? **No**
- b. Have all declaration and bylaw changes been recorded with the Bureau of Conveyance or the Land Court? **Yes**

15. Has the AOOU amended the declaration, bylaws, condominium map or other constituent documents to adopt the provisions of Chapter 514B, HRS? **Yes**

16.

- a. Has the AOOU utilized mediation or arbitration to resolve condominium disputes within the last two years? **No**
If yes, how many times? Mediation Arbitration
- b. Have any lawsuits been filed against the association in the last two years? **No**

- c. Are there any civil or criminal judgements entered against the association in the last two years? **No**

17. Internet Access

- a. Does the AOUO have a separate email account? **No**
If yes, what is the associations email address? (optional)
- b. Does the AOUO maintain an internet website? **No**
If yes, what is the website address? (optional)

- 18.** How does the AOUO disseminate new information to homeowners regarding changes to bylaws, house rules, HRS Chapters 514A and 514B, and HAR Chapter 107? Select all that apply.

Newsletter **Yes**

Mailings **Yes**

Bulletin Board **Yes**

Email

Website

Other

**CERTIFICATION OF CONDOMINIUM ASSOCIATION OFFICER, DEVELOPER,
100% SOLE OWNER or MANAGING AGENT WITH DELEGATION OF DUTY TO
REGISTER**

For the Period of JULY 1, 2011 - JUNE 30, 2013

1. I have read and understand the Instructions.
2. I certify that this application is complete as required, and is accompanied by the required documents and fees.
3. I certify that I am authorized to sign this certification on behalf of this condominium association, that the information provided is true and correct, and that there are no material omissions. *(It is unlawful for any AOUO, its officers, board, or agents to file with the Commission any information that is false or contains a material misstatement of fact (HRS §514A-134 and 514B-99.3). Any violation is a misdemeanor.)*
4. I certify that any changes to the required information provided in questions one (1) through five (5) of the registration application information, as required by HRS §514B-103(a)(1), shall be reported to the Real Estate Commission, in writing, within 10 days of the date of change. I further certify that the condominium association shall continue to update all other information during the biennial registration period as required by statute and provide updated information as requested by the Real Estate Commission. Also, written notification shall be provided to the Real Estate Commission at least 30 days prior to cancellation, termination, or a material change to the information provided in the evidence of fidelity bond coverage.
5. I certify that this condominium association does maintain continuous fidelity bond coverage in compliance with HRS §514B-143(a)(3), and that evidence of fidelity bonding or bond exemption shall be filed with the Real Estate Commission throughout this entire registration period. This condominium association acknowledges that its registration shall be automatically terminated for failure to provide the Real Estate Commission with evidence of continuous fidelity bond coverage (if applicable) through June 30, 2011.
6. This condominium association has received sufficient notice that if it fails to submit a completed registration application and fails to maintain continuous fidelity bond coverage or an approved fidelity bond exemption, it shall not have standing to maintain any action or proceeding in the courts of this State until it properly registers (HRS §514B-103(b)).

**Name of Association Officer, Developer, 100% Sole Owner, or
Managing Agent with Delegation of Duty to Register Completing this Application: JODEE ACOBA-
SUGANUMA**

■ **Managing Agent with Delegation of Duty to Register**

Name of Condominium Project: **CONTINENTAL APARTMENTS THE**

Reg.....593.....\$50

CEFT.....906.....\$4 x 71 = \$284

Bond Exemption...593.....\$ 0

Total Amount Due for Registration = \$334

Payment Method: ECHECK

Received On: 05/10/2011 08:43:30

Contact Name: Kacie Gouveia

Contact Email: