All information provided is public information. Changes are to be made by an officer of the condominium association. Please use a typewriter or print legibly in black ink.

Submit completed form to: DCCA – P&VLD Real Estate Commission

335 Merchant Street, Room 333 Honolulu, HI 96813

Name of Condominium Association: ADUO Wai lula ula at h	rauna Ka	RESOVE	# 5631
The information provided on this form is current as of Ottown 7610 previously provided to the Real Estate Commission ("Commission").	and replac	es the inform	ation
Please indicate the change being reported:			
Names and positions of the officers of the association (President, Secretary and Elen Lacerto, President	Treasurer required)		
Ed Johnoff, Treasurer		0 17 23	
Designated officer of the association who can be contacted directly: Name: Flein Lacerte Title: Pres.	ident	77 25 S	
Officer's Public Address: 62-3600 Amaui Pl #336	Kamuela	y the above	12
Management status: (Check ONE only and fill in corresponding information) Self-managed by the Association of Unit Owners (AOUO)			
Name of manager: Title: Telephone No.:			
Managed by Condominium Managing Agent			
Name:	RB Lic. No.:		•
Contact Person:	- —— Title:	*-	
Address:	Telephone No.:		
Contact designation (individual) to receive all AOUO correspondence (except bull Commission: (if different from above)	etins) and telephone	e calls from the	
Name:	Title:	·	
Mailing Address:	Telephone No.:		
Individual responsible for policy to provide reasonable access to persons authoriz	ed to serve civil pro	cess:	
Name:			
certify that I am authorized to sign this form on behalf of this condominium associated is true and correct. Signature of association officer, developer or 100% sole owner of correct.			
Frint Name	Date 5	14	
President Vice - President Secretary Treasurer Developer or Developer's Agent registering for unorganized association			