2000 UNIFORM BUSINESS REPORT (UBR) FILED Mar 02, 2000 8:00 am DOCUMENT # **715983** Secretary of State FLORIDA GARDENS CIVIC ASSOCIATION, INC. 03-02-2000 90005 041 ****61.25 Principal Place of Business Mailing Address 134 OHIO ROAD (33467) P O BOX 6227 P O BOX 6227 LAKE WORTH FL 33466-6227 LAKE WORTH FL 33466 3. Mailing Address 2. Principal Place of Business RD OHIO OHID Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-1162610 WOATH Not Applicable LAKE WORTH Country Country \$8.75 Additional 5. Certificate of Status Desired 'ALM BEACH PALM BEACH Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent BRUCE BURKE Street Address (P.O. Box Number is Not Acceptable) HALE. SHERRY L 212 AKRON RD CANTON LAKE WORTH FL 33467 WORTH 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. 07 -93 -00 SIGNATURE 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. **FEE IS \$61.25** Added to Fees **Department of State** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. ☐ Addition ☐ Defete TITLE TITLE MATYSKIEL NAME NAME STREET ADDRESS STREET ADDRESS 111 AKRON RD CITY-ST-ZIP CITY-ST-ZIP LAKE WORTH FL 33467 noitibhA TITLE ☐ Delete TITLE ☐ Change NAME EGGLESTON, FORREST NAME STREET ADDRESS STREET ADDRESS 62 W PALM AVE CITY-ST-ZIP CITY-ST-ZIP LAKE WORTH FL 33467 TITLE ☐ Delete TITLE ☐ Change Addition YOW, ANGELA NAME STREET ADDRESS **80 AKRON RD** STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAKE WORTH FL 33467 TREASURER Addition BB TITLE Delete Change BRUCE BURKE HALE, SHERRY L 49 CANTON RD STREET ADDRESS STREET ADDRESS 212 AKRON RD CITY-ST-ZIP CITY-ST-ZIP LAKE WORTH 33467 LAKE WORTH FL 33467 TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attag

CITY-ST-ZIP

10.

CITY-ST-ZIP

TREASURER

December 14, 1999

ToThe Board Members of Florida Gardens:

Effective today December 14, 1999 I resign as Treasurer of the Home Owners Association.

The last check I wrote is check nmber 5408 and the balance in the Checkbook is \$2,363.25 as of 12/14/99.

I am turning all records over to the President Robert.
Thanks I have enjoyed beging Treasurer for the past three years and will continute to help the Association in anyway I can.

7. Have

Expires June 23, 2001