

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2003 8:00 am
Secretary of State

04-17-2003 90189 043 ****61.25

DOCUMENT # 725100

1. Entity Name

GOLDEN LAKES VILLAGE ASSOCIATION, INC.



Principal Place of Business

**1700 GOLDEN LAKES BLVD
WEST PALM BEACH FL 33411**

Mailing Address

**1700 GOLDEN LAKES BLVD
WEST PALM BEACH FL 33411**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-1514568**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DIREKTOR, KENNETH S
500 AUSTRALIAN AVE S
WEST PALM BEACH FL 33401**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	☒ Delete
NAME	CAPLIN, NAOMI	
STREET ADDRESS	343 LAKE FRANCES DR	
CITY-ST-ZIP	WEST PALM BEACH FL 33411	
TITLE	D	☐ Delete
NAME	RUGGIERO, NICK	
STREET ADDRESS	151 LAKE ANNE DR	
CITY-ST-ZIP	WEST PALM BEACH FL 33411	
TITLE	S	☐ Delete
NAME	WORTHMAN, BERNARD	
STREET ADDRESS	119 LAKE CAROL DR	
CITY-ST-ZIP	WEST PALM BEACH FL 33411	
TITLE	P	☒ Delete
NAME	GOLDMAN, BERNICE	
STREET ADDRESS	114 LAKE IRENE DRIVE	
CITY-ST-ZIP	WEST PALM BEACH FL 33411	
TITLE	T	☐ Delete
NAME	KAPLAN, HY	
STREET ADDRESS	433 LAKE FRANCES DRIVE	
CITY-ST-ZIP	WEST PALM BEACH FL 33411	
TITLE	VP	☒ Delete
NAME	FRIES, GEORGE	
STREET ADDRESS	442 LAKE CAROL DRIVE	
CITY-ST-ZIP	WEST PALM BEACH FL 33411	

TITLE	DIRECTOR	☐ Change ☒ Addition
NAME	Tom MAZZA	
STREET ADDRESS	110 LAKE HELEN DRIVE	
CITY-ST-ZIP	WEST PALM BEACH FL 33411	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	PRESIDENT	☒ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	SECRETARY	☐ Change ☒ Addition
NAME	JEANNE SCHUPPER	
STREET ADDRESS	115 LAKE DORA	
CITY-ST-ZIP	WEST PALM BEACH FL 33411	
TITLE	VICE PRESIDENT	☒ Change ☐ Addition
NAME		
STREET ADDRESS	423 LAKE HELEN DR.	
CITY-ST-ZIP	WEST PALM BEACH FL 33411	
TITLE	TREASURER	☐ Change ☒ Addition
NAME	DORIS KING	
STREET ADDRESS	413 LAKE CAROL	
CITY-ST-ZIP	WEST PALM BEACH FL 33411	

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 attachment with an address, with all other like empowered.

SIGNATURE:

DORIS KING

56-689-2142

CR2E037 (10/02)