

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 10, 2001 8:00 am
Secretary of State
 05-10-2001 90113 016 ****61.25

DOCUMENT # 726200

1. Entity Name

COSTA DEL REY ASSOCIATION, INC.

Principal Place of Business

98 SE 6 AVENUE
 SUITE 2
 DELRAY BEACH FL 33483

Mailing Address

98 SE 6 AVENUE
 SUITE 2
 DELRAY BEACH FL 33483
 US

00048234



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2175 S. Ocean Blvd

3. Mailing Address

Suite, Apt. #, etc.

City & State

Delray Beach FL

City & State

4. FEI Number

59-1546789

Applied For

Not Applicable

Zip
33483

Country
USA

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

Dagher
~~DOUGHE~~, JOSEPH M
 98 SE 6 AVENUE
 SUITE 2
 DELRAY BEACH FL 33483

7. Name and Address of New Registered Agent

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.

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
Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEE, G 2175 S OCEAN BLVD DELRAY BCH FL 33483	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HERMANN, WILLIAM 2175 S OCEAN BLVD DELRAY BCH FL 33483	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FERGUSON, ELIZABETH 2175 S OCEAN BLVD DELRAY BEACH FL 33483	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST DAY, CHRIS 2175 S OCEAN BLVD DELRAY BCH FL 33483	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SECHLER, JERE 2175 S OCEAN BLVD DELRAY BCH FL 33483	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition Herrmann, William
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition Gold, Mark 2175 S. Ocean Blvd #304 Delray Beh FL 33483
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition Shichman, William 2175 S Ocean Blvd #304 Delray Beh, FL 33483
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition Warden, Sue 2175 S. Ocean Blvd #203 Delray Beh FL 33483
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/25/01 265-3272

CR2E037 (10/00)