

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 19, 2000 8:00 am
Secretary of State

01-19-2000 90010 019 ****61.25

DOCUMENT # 727242

1. Entity Name

KNOLLWOOD CLUB CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

5865 BASIL DRIVE
 WEST PALM BEACH FL 33415

5865 BASIL DRIVE
 WEST PALM BEACH FL 33415-7017

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1493165

Applied For

Not Applicable

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

NOEL LAMB, CHRISTINA (Christine)
2118 W BOND DR
WEST PALM BEACH FL 33415

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

Christine Noel Lamb

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1/7/2000

**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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	☐ Delete
NAME	LAMB, ROBERT W	
STREET ADDRESS	2118 W BOND DR	
CITY-ST-ZIP	W. PALM BCH. FL	
TITLE	D	☐ Delete
NAME	MARY JAKIMS	
STREET ADDRESS	2124 E BON DR	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	D	☐ Delete
NAME	MORALES, JULIO	
STREET ADDRESS	597 BASIL DR	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	D	☒ Delete
NAME	JACQUELINE FURTHMAN	
STREET ADDRESS	2124 E BOND DR	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	D	☐ Delete
NAME	WILLIAM J LAMB	
STREET ADDRESS	2118 W BOND DR	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	D	☒ Delete
NAME	FONTANET, GEORGINA	
STREET ADDRESS	2103 E BOND DR	
CITY-ST-ZIP	W. PALM BCH. FL	

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

Rick Jakims ☒ Change ☐ Addition
2124 E. Bond Dr.
West Palm Beach, FL.

Jane Davidson ☒ Change ☐ Addition
2108 E. Bond Dr.
West Palm Beach, FL.

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:

Christine Noel Lamb

1/7/2000 (sa) 433-4155

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)