

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 738976

1. Entity Name

THE FAIRWAYS OF BOCA LAGO CONDOMINIUM ASSOCIATIO

FILED
May 16, 2000 8:00 am
Secretary of State

05-16-2000 90125 022 ****61.25

Principal Place of Business 9039 VISTA DEL LAGO BOCA RATON FL 33428 US	Mailing Address 9039 VISTA DEL LAGO BOCA RATON FL 33428-3141 US
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2. Principal Place of Business Suite, Apt. #, etc. City & State Zip	3. Mailing Address Suite, Apt. #, etc. City & State Zip
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DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1849337	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

SILBERMAN, ELAINE
C/O BOCA LAGO MANAGEMENT
9039 VISTA DEL LAGO
BOCA RATON FL 33428

7. Name and Address of New Registered Agent

Name: FLANZENBAUM, ARNOLD
Street Address (P.O. Box Number is Not Acceptable): C/O BOCA LAGO MANAGEMENT
9039 VISTA DEL LAGO
City: BOCA RATON FL Zip Code: 33428

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: *Arnold Flanzenbaum* ARNOLD FLANZENBAUM 4-16-2000
/ 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	SD WEINER, IRWIN 8425 CASA DEL LAGO, #21-F BOCA RATON FL	Delete <input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD WINKLER, LILLIAN 8305 CASA DEL LAGO #38 BOCA RATON FL	Delete <input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD FLANZENBAUM, ARNOLD 8510 CASA DEL LAGO, 51B BOCA RATON FL	Delete <input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SILBERMAN, ELAINE 8410 CASA DE LAGO, 20G BOCA RATON FL	Delete <input checked="" type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHACHER, GILBERT 8409 CASA DEL LAGO, #178 BOCA RATON FL	Delete <input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FISHBEIN, RICHARD 8521 CASA DEL LAGO, 34B BOCA RATON FL	Delete <input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition SIMON, ALVIN 8450 CASA DEL LAGO #24D BOCA RATON FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 or without other life empowered.

SIGNATURE: *Arnold Flanzenbaum* ARNOLD FLANZENBAUM 4-16-2000 561 483-4000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #