## **2001 UNIFORM BUSINESS REPORT (UBR)** FILED May 11, 2001 8:00 am Secretary of State DOCUMENT # 739781 P. T. V. HOMEOWNERS ASSOCIATION, INC. 05-11-2001 90043 029 \*\*\*\*61.25 Principal Place of Business Mailing Address 10500 GREEN TRAIL DR. NORTH 10500 GREEN TRAIL DR. NORTH **BOYNTON BEACH FL 33436** BOYNTON BEACH FL 33436 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1981045 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 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) WEBER, SHARON A. E BECKER 500 AUSTRALIAN AVE. 9TH. FLOOR City Zip Code WEST PLAM BEACH FL 33401 FL 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: 9. Election Campaign Financing Make Check Pavable to **\$5.00** May Be Trust Fund Contribution. FEE IS \$61.25 Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE **Addition** Change NAME REINER, RICHARD NAME Stephens, Jack STREET ADDRESS STREET ADDRESS 10657 GREENTRAIL DR S 10418 Vereda Circle CITY-ST-ZIP CITY-ST-7IP **BOYNTON BEACH FL 33436** Boynton Beach, FL 33436 TITLE ☐ Delete TITLE Change NAME THOMPSON, RICHARD NAME LaPorte, Richard STREET ADDRESS STREET ADDRESS 10499 GREENTRAIL DR N 10281 Greentrail Dr. N. CITY-ST-ZIP CITY-ST-ZIP **BOYNTON BEACH FL 33436** Boynton Beach, FL 33436 TITLE Delete TITLE Change **X** Addition Wennerholt, Joan CROGHAN, DOROTHY STREET ADDRESS STREET ADDRESS 10619 Greentrail Dr. S. 10235 GREEN TRAIL DR N CITY-ST-7IP CITY-ST-ZIP Boynton Beach, FL 33436 **BOYNTON BEACH FL** ☐ Delete VD, S TITLE **VD** TITLE Change Addition NAME GOLNICK, GLORIA H NAME Forst, Betty A. STREET ADDRESS STREET ADDRESS 10974 GREENTRAIL DR S 10306 Greentrail Dr. N. CITY-ST-7IP CITY-ST-ZIP **BOYNTON BEACH FL 33436** Boynton Beach, FL 33436 TITLE X Delete TITLE ☐ Change ☐ Addition NAME NAME REINHOLD, THOMAS D STREET ADDRESS STREET ADDRESS 10708 GREENTRAIL DR S CITY-ST-ZIP CITY-ST-ZIP **BOYNTON BEACH FL 33436** TITLE ☐ Change ☐ Addition Delete TITLE NAME FRANCIS, AXSMITH H NAME STREET ADDRESS STREET ADDRESS 10724 GREEN TRAIL DR. S

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 recover 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 an address with all other like empowered.

CITY-ST-7IP

SIGNATURE: Richard Reiner-President

**BOYNTON BEACH FL 33436** 

CITY-ST-71P

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/27/01 (561) 737-1388

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Daytime Phone #