

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

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

03-17-2003 90090 009 ****61.25

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DOCUMENT # 740467

1. Entity Name

ESTANCIA SOUTH HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

**C/O CAS
951 BROKEN SOUND PKWY STE 250
BOCA RATON FL 33487**

Mailing Address

**C/O CAS
951 BROKEN SOUND PKWY STE 250
BOCA RATON FL 33487
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-1797557**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~COMMUNITY ASSOC SERVICES
951 BROKEN SOUND PKWY STE 250
BOCA RATON FL 33487~~

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

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TITLE	NAME	TITLE	NAME
VD	BELL, ROBBIN		
	6705 GIRALDA CIR		
	BOCA RATON FL		
PD	WEINSTEIN, EVE		
	6812 GIRALDA CIR		
	BOCA RATON FL 33433		
SD	MILJO, GERALDINE	SD	Linda Weiss
	6900 GIRALDA CIRCLE		6727 Giralda Circle
	BOCA RATON FL 33433		Boca Raton, FL 33433
D	RENTSCHLER, MARK		
	6900 GIRALDA CIR		
	BOCA RATON FL 33433		
TD	WEINSTEIN, ERIC		
	6812 GIRALDA CIRCLE		
	BOCA RATON FL 33433		

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**

3/12/03 SG 8530368

CR2E037 (10/02)