

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2000 8:00 am
Secretary of State

04-21-2000 90051 031 ****61.25

DOCUMENT # 740727

1. Entity Name
CHATEAU ON THE KNOLL HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business 9393 SW 61 WAY BOCA RATON FL 33428-3102	Mailing Address 9393 SW 61 WAY BOCA RATON FL 33428-6197
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1963226	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
KENNETH KESSNER (PRESIDENT) 9310D SW 61ST WAY BOCA RATON FL 33428		Name	SIGN HERE
		Street Address (P.O. Box Number is Not Acceptable)	
		City	

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: DATE: 4/14/00

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE: VP NAME: MAGYAR, EILEEN STREET ADDRESS: 9470 D SW 61 WAY CITY-ST-ZIP: BOCA RATON, FL 00000	<input checked="" type="checkbox"/> Delete	TITLE: Pres. NAME: mike winters STREET ADDRESS: 9285 A SW 61 WAY CITY-ST-ZIP: Boca Raton, FL. 33428	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: T NAME: CALHOUN, DOUGLAS STREET ADDRESS: 9440-C SW 61 WAY CITY-ST-ZIP: BOCA RATON FL	<input checked="" type="checkbox"/> Delete	TITLE: V. Pres NAME: Enrico Core STREET ADDRESS: 9285 C SW 61 WAY CITY-ST-ZIP: Boca Raton, FL. 33428	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: D NAME: KITE, BARBARA STREET ADDRESS: 9350-C SW 61 WAY CITY-ST-ZIP: BOCA RATON FL	<input checked="" type="checkbox"/> Delete	TITLE: Sec. NAME: Pat Banzo STREET ADDRESS: 9310C SW 61 WAY CITY-ST-ZIP: Boca Raton, FL. 33428	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: D NAME: BASSO, ANTOINETTE STREET ADDRESS: 9330-D SW 61 WAY CITY-ST-ZIP: BOCA RATON FL	<input checked="" type="checkbox"/> Delete	TITLE: Treas. NAME: Louis Trapani STREET ADDRESS: 9290 A SW 61 WAY CITY-ST-ZIP: Boca Raton, FL. 33428	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: PD NAME: KESSNER, KENNETH STREET ADDRESS: 9310 D SW 61 WAY CITY-ST-ZIP: BOCA RATON FL	<input type="checkbox"/> Delete	TITLE: Dir. NAME: marly Schweber STREET ADDRESS: 9290 B SW 61 WAY CITY-ST-ZIP: Boca Raton, FL. 33428	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: D NAME: SORIA, LOUIS STREET ADDRESS: 9300-B SW 61 WAY CITY-ST-ZIP: BOCA RATON FL	<input checked="" type="checkbox"/> Delete	TITLE: Dir. NAME: Ken Kessner STREET ADDRESS: 9310 SW 61 WAY CITY-ST-ZIP: Boca Raton, FL. 33428	<input checked="" 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)(j), 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: DATE: 4/14/00 DAYTIME PHONE #: 541-994-5850

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/99)