

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 743658

1. Entity Name

LIGHTHOUSE POINT GARDENS NORTH CONDOMINIUM ASSOC

Principal Place of Business

Mailing Address

1951 N.E. 39TH STREET
LIGHTHOUSE POINT FL 33064

1951 N.E. 39TH STREET
LIGHTHOUSE POINT FL 33064-7436

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

59-1201636

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BECKER POLIAKOFF & STREITFELD, P.A.
3111 STIRLING RD.
FT. LAUDERDALE FL 33312

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.

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
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME AVERY, GARY
STREET ADDRESS 1951 NE 39TH ST
CITY-ST-ZIP LIGHTHOUSE FL 33064

TITLE TD ☒ Change ☒ Addition
NAME JOSEPH DEBUVITZ
STREET ADDRESS 1951 NE 39TH ST.
CITY-ST-ZIP Lighthouse FL 33064

TITLE D ☒ Delete
NAME FRYNS, ELSIE
STREET ADDRESS 1951 NE 39TH ST
CITY-ST-ZIP LIGHTHOUSE FL 33064

TITLE KENNETH MCCURT ☐ Change ☐ Addition
NAME KENNETH MCCURT
STREET ADDRESS 1951
CITY-ST-ZIP

TITLE SD ☐ Delete
NAME HOLECEK, PATRICIA
STREET ADDRESS 1951 NE 39TH ST
CITY-ST-ZIP LIGHTHOUSE FL 33064

TITLE VPD ☐ Change ☒ Addition
NAME KENNETH MCCURT
STREET ADDRESS 1951 NE 39TH ST.
CITY-ST-ZIP Lighthouse FL 33064

TITLE D ☒ Delete
NAME FRYNS, EDWARD
STREET ADDRESS 1951 NE 39TH ST
CITY-ST-ZIP LIGHTHOUSE FL 33064

TITLE STEVEN COXMAN ASD ☒ Change ☒ Addition
NAME STEVEN COXMAN ASD
STREET ADDRESS 1951 NE 39TH ST.
CITY-ST-ZIP Lighthouse FL 33064

TITLE VPD ☐ Delete
NAME MURTHA, BARBARA
STREET ADDRESS 1951 N E 39TH STREET
CITY-ST-ZIP LIGHTHOUSE FL 33064

TITLE D ☒ Change ☒ Addition
NAME MARIA GIBLIN
STREET ADDRESS 1951 NE 39TH ST.
CITY-ST-ZIP Lighthouse FL 33064

TITLE TD ☒ Delete
NAME RIGGS, DOLORES
STREET ADDRESS 1951 NE 39TH ST
CITY-ST-ZIP LIGHTHOUSE FL 33064

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

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:

GARY AVERY
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

GARY AVERY
4-19-00 9541647-3520

CR2E037 (9/99)