

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 745754

1. Entity Name

SANDTREE HOME OWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

P.O. BOX 30481
PALM BEACH GARDENS FL 33420

P.O. BOX 30481
PALM BEACH GARDENS FL 33420

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BECKER & POLIAKOFF, PA
500 AUSTRALIAN AVE
9TH FLOOR
WEST PALM BEACH FL 33401

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
NAME LENTZ, DONNA
STREET ADDRESS 513 SANDTREE DRIVE
CITY-ST-ZIP PALM BCH GARDENS FL 33403 ☐ Delete

TITLE D
NAME Fred DeLouis
STREET ADDRESS 822 Sandtree Dr.
CITY-ST-ZIP Palm Beach Gardens, FL 33403 ☐ Change ☒ Addition

TITLE DS
NAME SEGAL, LOUIS
STREET ADDRESS 313 SANDTREE DR
CITY-ST-ZIP PALM BCH GRDNS FL 33403 ☒ Delete

TITLE D
NAME Carolyn Hamilton
STREET ADDRESS 410 Sandtree Dr.
CITY-ST-ZIP Palm Beach Gardens, FL 33403 ☐ Change ☒ Addition

TITLE DT
NAME TOMCZYK, MARY
STREET ADDRESS 906 SANDTREE DR.
CITY-ST-ZIP PALM BEACH GARDENS FL 33403 ☐ Delete

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

TITLE DS
NAME FURTAK, LOKE
STREET ADDRESS 414 SANDTREE DRIVE
CITY-ST-ZIP PALM BEACH GARDENS FL 33403 ☐ Delete

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

TITLE VPD
NAME HOWARD, CHRISTINE
STREET ADDRESS 407 SANDTREE DRIVE
CITY-ST-ZIP PALM BEACH GARDENS FL 33403 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ 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 all other like empowered.

SIGNATURE: x

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Donna Lentz, President

561/625-0201

Date

Daytime Phone #

FILED
Feb 20, 2002 8:00 am
Secretary of State

02-20-2002 90001 002 *****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)