

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Jan 31, 2001 8:00 am
Secretary of State

01-31-2001 90200 009 ****61.25

DOCUMENT # 746649

1. Entity Name

HAMMOCK AT COCONUT CREEK ASSOCIATION, INC.

Principal Place of Business

**HAMMOCK AT COCONUT ASSO.
1796 CEDAR DR.
COCONUT CREEK FL 33063
US**

Mailing Address

**HAMMOCK AT COCONUT ASSO.
1796 CEDAR DR.
COCONUT CREEK FL 33063
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1976369

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SCHUMAN, DAVID
1800 SATINWOOD CIRCLE
COCONUT CREEK FL 33-0063**

Name: **Krimsky, Barbara**

Street Address (P.O. Box Number is Not Acceptable)

1801 Cedar Drive

City: **Coconut Creek**

FL

Zip Code **33063**

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

BARBARA KRIMSKY

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/23/01

**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 **BLANKEN, MARY**
STREET ADDRESS **1778 MAPLEWOOD CIR**
CITY-ST-ZIP **COCONUT CREEK FL 33063**

TITLE **PD** ☒ Change ☐ Addition
NAME **Sanders, Charles**
STREET ADDRESS **1807 Tamarind**
CITY-ST-ZIP **Coconut Creek, FL 33063**

TITLE **VPD** ☒ Delete
NAME **BRENNER, JAY**
STREET ADDRESS **1793 MAPLEWOOD TRAIL**
CITY-ST-ZIP **COCONUT CREEK FL 33063**

TITLE **VPD** ☒ Change ☐ Addition
NAME **Schuman, David**
STREET ADDRESS **1800 Satinwood Circle**
CITY-ST-ZIP **Coconut Creek, FL 33063**

TITLE **D** ☒ Delete
NAME **SANDERS, CHARLES**
STREET ADDRESS **1807 TAMARIND LANE**
CITY-ST-ZIP **COCONUT CREEK FL 33063**

TITLE **TD** ☐ Change ☒ Addition
NAME **Krimsky Barbara**
STREET ADDRESS **1801 Cedar Drive**
CITY-ST-ZIP **Coconut Creek FL 33063**

TITLE **TD** ☒ Delete
NAME **SCHUMAN, DAVID**
STREET ADDRESS **1800 SATINWOOD CIR**
CITY-ST-ZIP **COCONUT CREEK FL 33063**

TITLE **SD** ☐ Change ☒ Addition
NAME **Knowles, Sally**
STREET ADDRESS **1798 Satinwood Circle**
CITY-ST-ZIP **Coconut Creek, FL 33063**

TITLE **VPD** ☒ Delete
NAME **ZUCKERMAN, MAX**
STREET ADDRESS **4719 SATINWOOD TRAIL**
CITY-ST-ZIP **COCONUT CREEK FL 33063**

TITLE **D** ☐ Change ☒ Addition
NAME **Formisano Jerry**
STREET ADDRESS **1798 Maplewood Trail**
CITY-ST-ZIP **Coconut Creek FL 33063**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **Pool, Sandra**
STREET ADDRESS **1812 Tamarind Lane**
CITY-ST-ZIP **Coconut Creek, FL 33063**

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
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/23/01
Date

954-984-2886
Daytime Phone #

CR2E037 (10/00)