

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 751525

1. Entity Name

PRADERA HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

21367 CAMPO ALLEGRO DR.
BOCA RATON FL 33433
US

Mailing Address

C/O BENCHMARK PROP.
7932 WILES RD
CORAL SPRINGS FL 33067

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

59-2154960

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MILLER, LEWIS
21375 SONESTA WY
BOCA RATON FL 33433

7. Name and Address of New Registered Agent

Name

Kaye & Roger PA

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

6261 NW 6 Way

City

Ft Lauderdale

FL

Zip Code
33309

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

Roger Kaye President

4/4/01

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MILLER, LEWIS 21375 SONESTA WY BOCA RATON FL 33433	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD JAFEE, HAROLD 21374 PLACIDA TERRACE BOCA RATON FL 33433	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP EDWARDS, GEORGE 950 N FEDERAL HIGHWAY POMPANO BEACH FL 33062	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GREENWALD, JEROME 21362 CAMPO ALLEGRE DR. BOCA RATON FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COHEN, MURIEL 21380 CAMPO ALLEGO DR BOCA RATON FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S2VP MICKIE, DION 21370 CAMPO ALLEGRO DRIVE BOCA RATON FL 33433	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director McKeever, Linda 6770 Pradera Drive Boca Raton, FL 33433	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Armater, Joseph 21367 Campo Allegre Dr Boca Raton, FL 33433	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director-President Dion, Mickie 21370 Campo Allegre Dr Boca Raton, FL 33433	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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:

Dion Mickie
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/22/01

Daytime Phone #



DO NOT WRITE IN THIS SPACE

0036411

CR2E037 (10/00)