

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 11, 2000 8:00 am
Secretary of State

02-11-2000 90011 029 ****61.25

DOCUMENT # 752906

1. Entity Name

VILLAS AT BONAVENTURE IN TRACT 37 NORTH CONDOMIN

Principal Place of Business

Mailing Address

**WEST BROWARD PROPERTY MANG
 8270 STATE ROAD 84
 DAVIE FL 33325
 US**

**11530 STATE ROAD 84
 DAVIE FL 33325-4022
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2001078

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

**WEST BROWARD PROPERTY MANAGEMENT INC
 11530 STATE ROAD 84
 DAVIE FL 33325**

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

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	SULTAN, JERRY	
STREET ADDRESS	16021 FAIRWAY LANE	
CITY-ST-ZIP	FT. LAUDERDALE FL 33326	
TITLE	SD	<input type="checkbox"/> Delete
NAME	SONIA CHAZIN	
STREET ADDRESS	272 FAIRWAY CIRCLE	
CITY-ST-ZIP	FT. LAUDERDALE FL 33326	
TITLE	VP	<input type="checkbox"/> Delete
NAME	HARVEY ROSENBLOOM	
STREET ADDRESS	260 FAIRWAY CIRCLE	
CITY-ST-ZIP	FT. LAUDERDALE FL 33326	
TITLE	P	<input type="checkbox"/> Delete
NAME	BARON, LAWRENCE	
STREET ADDRESS	302 FAIRWAY CIRCLE	
CITY-ST-ZIP	FT. LAUDERDALE FL 33326	
TITLE	T	<input type="checkbox"/> Delete
NAME	FEINSTEIN, JACK	
STREET ADDRESS	244 FAIRWAY CIRCLE	
CITY-ST-ZIP	FT. LAUDERDALE FL 33326	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	President	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Lawrence Baron	
STREET ADDRESS	302 Fairway Circle	
CITY-ST-ZIP	Weston, FL 33326	
TITLE	Vice-President	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Harvey Rosenbloom	
STREET ADDRESS	260 Fairway Circle	
CITY-ST-ZIP	Weston, FL 33326	
TITLE	Secretary	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Sonia Chazin	
STREET ADDRESS	272 Fairway Circle	
CITY-ST-ZIP	Weston, FL 33326	
TITLE	Treasurer	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Jack Feinstein	
STREET ADDRESS	244 Fairway Circle	
CITY-ST-ZIP	Weston, FL 33326	
TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Richard Strauss	
STREET ADDRESS	258 Fairway Circle	
CITY-ST-ZIP	Weston, FL 33326	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/3/00 954-472-3820
 Date Daytime Phone #