

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 14, 2002 8:00 am
Secretary of State

01-14-2002 90051 036 ****69.50

DOCUMENT # 755736

1. Entity Name

PATIO VILLAGE HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

16868 PATIO VILLAGE LN.
 FORT LAUDERDALE FL 33326
 US

Mailing Address

16868 PATIO VILLAGE LANE
 FORT LAUDERDALE FL 33326
 US

2. Principal Place of Business

Same as above.

3. Mailing Address

SAME AS ABOVE

Suite, Apt. #, etc.

NA.

Suite, Apt. #, etc.

NA.

City & State

FORT LAUDERDALE - FLORIDA

City & State

WESTON - FLORIDA

Zip

33326

Country

USA

Zip

33326

Country

USA

4. FEI Number

59-2046374

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

POLIAKOFF, GARY
 3111 STERLING ROAD
 FT. LAUDERDALE FL 33312-6525
REG. AGENT.

7. Name and Address of New Registered Agent

Name: *NA.*

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.

No CHANGE.

SIGNATURE: *David M Cohen*

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	<input type="checkbox"/> Delete
PD	COHEN, DAVID M.	16868 PATIO VILLAG LANE	FT LAUDERDALE FL	<input type="checkbox"/>
V	HAWKINS, MAGDA	16814 PATIO VILLAGE LANE	FT LAUDERDALE FL	<input type="checkbox"/>
T	PAGE, RAY	342 PATIO VILLAG TERR.	FT LAUDERDALE FL	<input type="checkbox"/>
D	BRAUN, WILLIAM	506 PATIO VILLAGE LAKE DR.	FT. LAUDERDALE FL	<input type="checkbox"/>
S	REY, CAROL LEE	363 PATIO VILLAGE TERR	FT LAUDERDALE FL	<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
PRESIDENT	DAVID M COHEN	16868 Patio Village Lane	Bonhaventure 16868 33226	<input type="checkbox"/>	<input type="checkbox"/>
VICEPRES.	MAGDA, Hawkins	16814 - Patio Village Lane	FT. Lauderdale FL.	<input type="checkbox"/>	<input type="checkbox"/>
TREASURER	RAY Page	342 Patio Village Terr.	FT. Lauderdale FL. 33326	<input type="checkbox"/>	<input type="checkbox"/>
EDITOR	WILLIAM BRAUN	506 PATIO VILLAGE LAKE DRIVE	FT. LAUDERDALE - FL. 33326	<input type="checkbox"/>	<input type="checkbox"/>
	Carol Lee REY	363 - PATIO VILLAGE TERR.	PATIO VILLAGE TERR - FT. LAUD - 33326	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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:

DAVID M COHEN DAVID M COHEN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)