

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 21, 2000 8:00 am
Secretary of State

03-21-2000 90032 031 ****61.25

DOCUMENT # 757114

1. Entity Name
LAUREL OAK HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business Mailing Address

660 W LINTON BLVD % DF: GOUVEST ENT.
 STE 202 660 W LINTON BLVD #202
 DELRAY BCH FL 33444 DELRAY BCH FL 33444-8150
 US US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address

6401 Congress Avenue **6401 Congress Avenue**

Suite, Apt. #, etc. Suite, Apt. #, etc.

Suite 140 **Suite 140**

City & State City & State

Boca Raton, FL **Boca Raton, FL**

Zip Country Zip Country

33487 **USA** **33487** **USA**

4. FEI Number Applied For

59-2103533 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GOODMAN, CHARLES
15840 LAUREL OAK CIRCLE
DELRAY BEACH FL 33484

7. Name and Address of New Registered Agent

Name **Karen Lippman**

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

6401 Congress Avenue

Suite 140

City State Zip Code

Boca Raton **FL** **33487**

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 **Karen Lippman** DATE **Feb 03/00**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GOODMAN, CHARLES		NAME	Saul Freeman	
STREET ADDRESS	15840 LAUREL OAK CIRCLE		STREET ADDRESS	15980 Laurel Oak Circle	
CITY-ST-ZIP	DELRAY BCH, FL 00000		CITY-ST-ZIP	Delray Beach, FL 33484	
TITLE	VD	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SCHWARTZ, BERNARD		NAME	Irving Brand	
STREET ADDRESS	15828 LAUREL OAK CIRCLE		STREET ADDRESS	5467 Laurel Oak Street	
CITY-ST-ZIP	DELRAY BEACH FL		CITY-ST-ZIP	Delray Beach, FL 33484	
TITLE	SD	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LIPTON, ESTELLE		NAME	Philip H. Blocher	
STREET ADDRESS	5380 LAUREL OAK STREET		STREET ADDRESS	15956 Laurel Oak Cir	
CITY-ST-ZIP	DELRAY BCH, FL 00000		CITY-ST-ZIP	Delray Beh, FL 33484	
TITLE	TD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MAI, KURT		NAME		
STREET ADDRESS	5427 LAUREL OAK STREET		STREET ADDRESS		
CITY-ST-ZIP	DELRAY BCH, FL 00000		CITY-ST-ZIP		
TITLE	O	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FREEMAN, SAUL		NAME		
STREET ADDRESS	15980 LAUREL OAK CIR.		STREET ADDRESS		
CITY-ST-ZIP	DELRAY BCH, FL 00000		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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: **KURT MAI** DATE: **3/14/2000** DAYTIME PHONE #: **561 495 7558**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)