2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered

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FILED DOCUMENT # **759274** Mar 13, 2000 8:00 am 1. Entity Name **Secretary of State** CYPRESS POINT VILLAS ASSOCIATION, INC. 03-13-2000 90024 006 ****61.25 Mailing Address Principal Place of Business % HAWK-EYE MANAGEMENT % HAWK-EYE MANAGEMENT 3901 N FEDERAL HIGHWAY, STE 202 3901 N FEDERAL HIGHWAY, STE 202 **BOCA RATON FL 33431 BOCA RATON FL 33431-4509** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2164750 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) PATTI, PAUL N. **%HAWK-EYE MANAGEMENT** 3901 N FEDERAL HIGHWAY, STE 202 Zip Code City FL **BOCA RATON FL 33431** 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing Make Check Pavable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61,25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME HAEBERMAN, MARK NAME STREET ADDRESS STREET ADDRESS 20394 LINKSBIEW DR CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL** TITLE D Delete TITLE Change Addition MRMET, RICHARD 20571 LINKSVIEW WAY BOCA RATON FL. 33434 NAME **ELKINS, ROBERT** NAME STREET ADDRESS STREET ADDRESS 20544 LINKSVIEW DR. CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33434** Delete Addition TITLE STD TITLE KLAFTER, JERRY 20401 LINKSVIEW DRIVE KINGSLEY, RITA NAME NAME STREET ADDRESS STREET ADDRESS 20477 LINKSVIEW WAY CITY-ST-ZIP BOCA RATON, FL. 33434 CITY-ST-ZIP **BOCA RATON FL 33434** ☐ Delete TITLE □ Change □ Addition TITLE NAME RAY, HERBERT NAME STREET ADDRESS STREET ADDRESS 20555 LINKSVIEW WAY CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33434** Change Addition ☐ Delete TITLE TITLE REYER, CORINNE NAME NAME STREET ADDRESS STREET ADDRESS 20493 LINKSVIEW WAY CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33434** Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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