

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 767104

1. Entity Name

WESTWOODS OF BONAIRE HOMEOWNERS' ASSOCIATION, P.

FILED
Mar 27, 2001 8:00 am
Secretary of State

03-27-2001 90026 012 ****61.25

Principal Place of Business

Mailing Address

A & M PROPERTY MGT.
3475 HIATUS RD
SUNRISE FL 33351
US

A & M PROPERTY MGT.
3475 HIATUS RD
SUNRISE FL 33351
US

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

59-2390294

Applied For

Not Applicable

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

FRIGOLA, MICHELLE C P.A.
5340 NORTH FEDERAL HIGHWAY
SUITE 104
LIGHTHOUSE POINT FL 33351

Name

A & M Property Management

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

3475 N. Hiatus Road

City

Sunrise

FL

33351

Zip Code

FL

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)

3/23/01
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D
NAME COHEN, GEORGE ☐ Delete
STREET ADDRESS 7515 NW 79TH AVE #209
CITY-ST-ZIP TAMARAC FL

TITLE D ☐ Change ☒ Addition
NAME Gene Petrino
STREET ADDRESS 7579 NW 79th Avenue #103
CITY-ST-ZIP Tamarac, FL 33321

TITLE ST ☒ Delete
NAME SHAW, DAVID
STREET ADDRESS 7547 N.W. 79TH AVE. #214
CITY-ST-ZIP TAMARAC FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP ☐ Delete
NAME WAX, BERNIE
STREET ADDRESS 7625 NW 79 AVE 3A-301
CITY-ST-ZIP TAMARAC FL 33321

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE PD ☐ Delete
NAME SLOANE, JERRY
STREET ADDRESS 7699 N.W. 79TH AVE. #2A-203
CITY-ST-ZIP TAMARAC FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME TROHATOS, ALLEN
STREET ADDRESS 7737 N.W. 79TH AVE.
CITY-ST-ZIP TAMARAC FL 33321

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)