2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 811808

1. Entity Name

BREAKWATER HOMES ASSOCIATION

FILED
Mar 02, 2000 8:00 am
Secretary of State

03-02-2000 90074 041 ***150.00

Principal Place of Business	Mailing Address
2621 SE 21ST STREET FT. LAUDERDALE FL 33316	2621 SE 21ST STREET FT. LAUDERDALE FL 33316-3201

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-0807093 — 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
RUPP, WILLIAM R. 2190 S.E. 17TH STREET, #211 FT. LAUDERDALE FL 33316	Name Street Address (P.O. Box Number is Not Acceptable): 1702 CORDOVA ROAD # 2 City: FT. LAUDERDALE FL Zip Code: 33316

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	PT ☐ Delete	TITLE	DIRECTOR ☐ Change ☒ Addition
NAME	BORDERS, CHARLES	NAME	ARTHUR KNOCKENHAUER
STREET ADDRESS	2521 SE 21ST	STREET ADDRESS	2020 SE 20 AVE
CITY-ST-ZIP	FT. LAUDERDALE FL 33316	CITY-ST-ZIP	FT LAUD 33316
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	BORUP, BARBARA	NAME	
STREET ADDRESS	2611 SE 21ST ST	STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL	CITY-ST-ZIP	
TITLE	S ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	MCGEEHAN, NORMA	NAME	
STREET ADDRESS	2013 SE 26TH AVENUE	STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL	CITY-ST-ZIP	
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	MANGOLD, ANTHONY	NAME	
STREET ADDRESS	2012 SE 26TH AVE	STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE, FL 00000 33316	CITY-ST-ZIP	
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	MCLAUGHLIN, GEO	NAME	
STREET ADDRESS	2605 SE 20TH ST	STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE, FL 00000	CITY-ST-ZIP	
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	TWOROGER, LUISE	NAME	
STREET ADDRESS	2009 SE 26TH AVENUE	STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL	CITY-ST-ZIP	

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Norma McGeehan Secy 2/18/00 954-527-5868

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

CR2E034 (9/99)