## **2002 UNIFORM BUSINESS REPORT (UBR)**

## **FILED** Feb 13, 2002 8:00 am DOCUMENT # N0100005483 Secretary of State 1. Entity Name 02-13-2002 90199 005 \*\*\*\*70.00 SECRET POND P.U.D. HOMEOWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address C/O TOWN & COUNTRY BUILDERS C/O TOWN & COUNTRY BUILDERS 2295 CORPORATE BLVD., N.W., SUITE 117 2295 CORPORATE BLVD., N.W., SUITE 117 **BOCA RATON FL 33431** BOCA RATON FL 33431 2. Principal Place of Business O ANN MGMT. INC. 3. Mailing Address 40 AUN MGMT. Inc. Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 7300 W. CAMING REAL STEZET 7300 W CAMINO ROML 227 City & State 4. FEI Number 3745097 Applied For City & State BOCA RAJON, FL BOCA RATON, Not Applicable \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent RUMAID PLATT ESG Street Address (P.O. Box Number is Not Acceptable) KELLY, TIMOTHY R C/O TOWN & COUNTRY BUILDERS 170 N.W. SPANISH RIVER BLW 2295 CORPORATE BLVD., N.W., SUITE 117 City BOCA & ATON **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 Signature, typed or printed name of registered agent and title if (NOTE: Registered Agent signature required when reinstating) **\$5.00** May Be 9. Election Campaign Financing Make Check Payable to **FILE NOW: FEE IS \$61.25** Trust Fund Contribution. Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. (9/01) ☐ Addition TITLE ☐ Delete TITLE Change KELLY, TIMOTHY R NAME NAME CR2E037 2295 CORPORATE BLVD. N.W., SUITE 117 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33431** Delete Change ☐ Addition TITLE TITLE Liller, Stephen B NAME NAME 2295 CORPORATE BLVD. N.W., SUITE 117 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33431** DS TITLE Delete TITLE Change ☐ Addition PLATT, RONALD L NAME NAME 2295 CORPORATE BLVD. N.W., SUITE 117 STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33431** CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE Change ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITI F ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE Delete TITLE ☐ Change

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

STREET ADDRESS

CITY-ST-ZIP

NAME

SIGNATURE:

NAME STREET ADDRESS

CITY-ST-ZIP