2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2000 8:00 am
Secretary of State
04-28-2000 90421 019 ****61.25

DOCUMENT # N01621

1. Entity Name

MONTEGO BAY HOMEOWNERS ASSOCIATION, INC. OF DADE

Principal Place of Business	Mailing Address
9780 SW 216 ST MIAMI FL 33190	9780 SW 216 ST MIAMI FL 33190-1189

DO NOT WRITE IN THIS SPACE

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 59-2774543 ☐ 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
PAIGE, ROBERT E ~~11440 NORTH KENDALL DRIVE~~ 7000 SW 97 AVENUE ~~PENTHOUSE 400~~ SUITE 209 MIAMI FL 33176 MIAMI, FL 33173	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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] 3-10-2000
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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 / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD BODENMILLER, ROBERT 9780 S W 216 STREET MIAMI FL 33190	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Copa, Jim 9780 SW 216 Street Miami, Fl 33190	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BAGLIN, DAVID 9780 S W 216 STREET MIAMI FL 33190	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Arendas, Albert 9780 SW 216 Street Miami, Fl 33190	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD ARENDAS, ALBERT 9780 S W 216 STREET MIAMI FL 33190	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Ingersol, Todd 9780 SW 216 Street Miami, Fl 33190	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD VOELZ, THOMAS 9780 S W 216 STREET MIAMI FL 33190	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Viener, Fred 9780 SW 216 Street Miami, Fl 33190	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD VIENER, FRED 9780 S W 216 STREET MIAMI FL 33190	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/99)

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] UPDATED 4-17-00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #