Mailing Address

3. Mailing Address

City & State

7287 W. ATLANTIC AVENUE

DELRAY BEACH FL 33484

Suite, Apt. #, etc.

1273 W. ATLANTIC

F 4

Country Meac

Name

## 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

7273

alm Beach

Signature, typed or printed name of registered agent and title if applicable

FILE NOW: FEE IS \$61.25

6. Name and Address of Current Registered Agent

## DOCUMENT # N0200007012 EQUUS PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business

7287 W. ATLANTIC AVENUE

2. Principal Place of Business

SCHULTZ STANLEY "

7287 W. ATLANTIC AVENUE **DELRAY BEACH FL 33484** 

the obligations of registered agent.

7273 W. ATLANTICAVE

DELRAY BEACH FL 33484

Suite, Apt. #, etc.

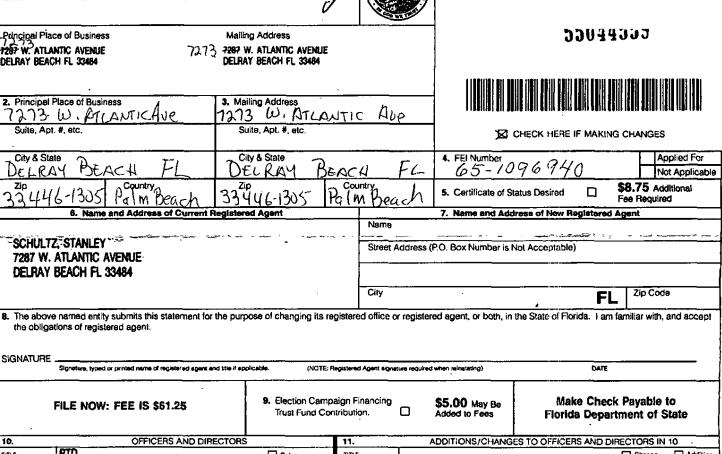
City & State

DELRAY

SIGNATURE

**FILED** May 29, 2003 8:00 am Secretary of State

05-05-2003 90310 033 \*\*\*\*61.25



,		Mast and Continuing in		Florida Department of State			omin	
10.	OFFICERS AND DIRECTORS		11.		ADDITIONS/CHANGES	TO OFFICERS AND E	IRECTORS IN	10
TITLE NAME STREET ACCRESS 17-ST-ZIP	PTD SCHULTZ, STANLEY 7287 W. ATLANTIC AVENUE DELRAY BEACH FL 33484	☐ Oelete	TITLE NAME STREET ADDRES CITY-ST-ZIP	s			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD LEVINE, ALAN M 7287 W. ATLANTIC AVENUE DELRAY BEACH FL 33484	□ Celete	TITLE NAME STREET ADORES CITY-ST-ZIP	s			Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SIEMENS, RICHARD 4800 N.: FEDERAL: HIGHWAY, SUITE 308D BOCA RATON FL 33431	□ Oslete	TITLE NAME STREET ADORES CITY-ST-ZIP	5		• † †	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Detete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	s			Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	5			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		2	. 3	☐ Change	☐ Addition

9. Election Campaign Financing

I hereby certify that the information supplied with indicated on this report or supplemental report is of the corporation or the receiver or trustee empo or the exemption stated in Section 119.07(3Xi), Florida Statutes. I further certify that the information my signature shall have the same legal effect as if made under oath; that I am an officer or director tas fedured by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an addre

SIGNATURE: