

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N19587

1. Entity Name

EAGLETON HOMEOWNERS ASSOCIATION, INC.

FILED
May 19, 2000 8:00 am
Secretary of State

05-19-2000 90069 012 ****70.00

Principal Place of Business 300 AVENUE OF CHAMPIONS PALM BCH GRDNS FL 33418 US	Mailing Address 300 AVENUE OF CHAMPIONS PALM BCH GRDNS FL 33418-3664 US
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State	4. FEI Number 65-0080387	Applied For ☐ Not Applicable
Zip	Country	Zip	Country



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

QUEEN, SUSAN M
300 AVENUE OF CHAMPIONS
PALM BCH GDNS FL 33418

7. Name and Address of New Registered Agent

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 _____ DATE _____
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP LANSAT, JOEL 300 AVENUE OF CHAMPIONS PALM BEACH GARDENS FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SHARON PEGG 300 AVENUE OF CHAMPIONS PALM BEACH GARDENS FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PREMUROSO, CONNIE 300 AVENUE OF CHAMPIONS PALM BEACH GARDENS FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MINCH, DONALD 300 AVENUE OF CHAMPIONS PALM BCH GDNS FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KURLAND, JOANNE 300 AVENUE OF CHAMPIONS PALM BEACH GARDENS FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SETTEDUCATE, FRANK 300 AVENUE OF CHAMPIONS PALM BEACH GARDEN FL	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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JOE Gallucci
300 AVE of the Champions
Palm Beach Gardens, FL 33418

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 Required 5-04-00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)