

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 26, 2002 8:00 am
Secretary of State

03-26-2002 90065 027 ****61.25

DOCUMENT # N210605

1. Entity Name
COUNTRY HOMES AT EMERALD FOREST HOMEOWNER'S ASSOC.

DO NOT WRITE IN THIS SPACE

80051374

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 4000 S. 57th Ave.		3. Mailing Address Same		4. FEI Number 65-0056856		Applied For Not Applicable	
Suite, Apt. #, etc. Suite 101		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
City & State Lake Worth, FL		City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
Zip 33463	Country Palm Beach	Zip	Country				

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Allan Ziker
Street Address (P.O. Box Number is Not Acceptable) 13300 Opal Lane
City Wellington FL Zip Code 33414

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FEE IS \$81.25
Initial or Amended UBR

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

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PRESIDENT ALAN A. ZIKER 13300 OPAL LANE WELLINGTON FL 33414	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V.P. DAN SMITH 13292 OPAL LANE WELLINGTON FL 33414	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SECRETARY/TREASURER LINDA SMITH 1300 BLUE SWALLOW TR WELLINGTON FL 33414	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DO NOT WRITE IN THIS SPACE
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: Alan A. Ziker PRESIDENT March 14, 2002