## 2003 NOT-FOR-PROFIT CORPORATION

## **UNIFORM BUSINESS REPORT (UBR) DOCUMENT # N25238**

1. Entity Name

## MARBELLA PARK HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business Mailing Address 8211 W BROWARD BLVD 8211 W BROWARD BLVD PH-1 5TH FLOOR PH-1 5TH FLOOR PLANTATION FL 33324 PLANTATION FL 33324 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc.

## **FILED** Jan 27, 2003 8:00 am **Secretary of State**

01-27-2003 90339 003 \*\*\*\*61.25



☐ CHECK HERE IF MAKING CHANGES

City & State		City & State	City & State		4. FEI Number 65-0105177	Applied For		
				_			Not Applicable	
Zip	Country	Zip	Country		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
6.	6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
		<del></del>		Nama				

JEFFREY A WINIKOFF % STEIN, ROSENBERG & WINIKOFF, PA 4875 N FEDERAL HWY 7TH FL FT. LAUDERDALE FL 33308

Name				
Street Address (P.	O. Box Number is Not A	cceptable)		
	······································			
City		FI	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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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 Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE	PD	☐ Delete	TITLE			ast name	☐ Change	Addition
NAME	DELMAR, ERNESTO		NAME		i	4 000		ļ
STREET ADDRESS	8211 W BROWARD BLVD PH1		STREET ADDRESS		L	a."		
CITY-ST-ZIP	PLANTATION FL 33374		CITY-ST-ZIP					
TITLE	VPD	Delete	TITLE	VPD	<u> </u>		Change	☐ Addition
NAME	COSTA, JAMIE	,	NAME		squez			}
STREET ADDRESS	8211 W BROWARD BLVD PH 1		STREET ADDRESS	8211 Brown	*K, B/~	7 SH1		Į
CITY-ST-ZIP	PLANTATION FL°33374		~CITYSSTEZIP	I I AR LACTOR		3·3·3 <b>:2</b> 4		
TITLE	SD	Delete	TITLE	SP \			☐ Change	Addition
NAME	GONZALEZ, LISA	7 `	NAME	Whipple.	Jocel	40_		
STREET ADDRESS	8211 W BROWARD BLVD., STE PH1		STREET ADDRESS	8211 3 mua	4 BIV3			1
CITY-ST-ZIP	PLANTATION FL 33374		CITY-ST-ZIP	Plantation,	FL.	33324		
TITLE	T	Delete	TITLE		<b>4</b> 4		Change	Addition
NAME	Prouse, Stephen	•	NAME	Jerez, M 8211 Broward	arlha	<b>_</b>		
STREET ADDRESS	8211 W BROWARD BLVD., STE PH1		STREET ADDRESS	8711 Broward	Blag	PHI		
CITY-ST-ZIP	PLANTATION FL 33374		CITY-ST-ZIP	Plantation	FL	33324		
TITLE .	D	Delete	TITLE	<u> </u>			☐ Change	Addition
NAME	BENNETT, ROBERT	^	NAME					
STREET ADDRESS	8211 W BROWARD BLVD., STE PH1		STREET ADDRESS					1
CITY-ST-ZIP	PLANTATION FL 33374		CITY-ST-ZIP					,
TITLE		☐ Delete	TITLE				☐ Change	Addition
NAME			NAME					
STREET ADDRESS			STREET ADDRESS					
CITY-ST-ZIP		•	CITY-ST-ZIP	ŀ				

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:

(305) 829-3408