

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 07, 2004 8:00 am
Secretary of State

04-07-2004 90056 007 ****61.25

DOCUMENT # N44269

1. Entity Name

CLEARBROOK VILLAGE, INC.



Principal Place of Business

10780 CEDAR POINT BLVD.
BOYNTON BEACH FL 33437

Mailing Address

10780 CEDAR POINT BLVD.
BOYNTON BEACH FL 33437

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

65-0301722

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

CUSTOM PROPERTY MANAGEMENT, INC.
2328 SOUTH CONGRESS AVENUE, M SUITE 2A
WEST PALM BEACH FL 33406

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. 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
Due By May 1, 2004

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

TITLE PD
NAME SHUBIN, STANLEY ☐ Delete
STREET ADDRESS 10023 53RD WAY S #1801
CITY-ST-ZIP BOYNTON BEACH FL 33437

TITLE VPD
NAME VINEBERG, ALBERT ☐ Delete
STREET ADDRESS 10015 53RD WAY S #1601
CITY-ST-ZIP BOYNTON BEACH FL 33437

TITLE TR
NAME SAFTON, GERALD ☐ Delete
STREET ADDRESS 10011 53RD WAY SO 1502
CITY-ST-ZIP BOYNTON BEACH FL

TITLE SD
NAME SYLVETSKY, JOAN ☐ Delete
STREET ADDRESS 10043 -53RD WAY S #2403
CITY-ST-ZIP BOYNTON BEACH FL 33437

TITLE D
NAME GOLDMAN, HARRIET ☒ Delete
STREET ADDRESS 10075 53RD WAY S #1402
CITY-ST-ZIP BOYNTON BEACH FL 33437

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

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

TITLE D ☐ Change ☒ Addition
NAME HIRSCHHAUT, JANET
STREET ADDRESS 10047 53rd WAY SO. #901
CITY-ST-ZIP BOYNTON BEACH, FL 33437

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

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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #