

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 07, 2001 8:00 am
Secretary of State

0045633

DOCUMENT # N48018

1. Entity Name

MONTEGO BAY TOWNHOUSE HOMEOWNER'S ASSOCIATION, I

04-07-2001 90027 006 ****61.25

U0032595



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

2910 PORT ROYALE LN
FT LAUDERDALE FL 33308

2910 PORT ROYALE LN
FT LAUDERDALE FL 33308

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0380937

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

ROWLAND, ED
2920 PORT ROYALE LANE
FT LAUDERDALE FL 33308

Name
STEVEN L. BERZNER, ESO.

Street Address (P.O. Box Number is Not Acceptable)
1040 Bayview Drive, Suite 605

City **Fort Lauderdale** **FL** Zip Code **33304**

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

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
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **TD** ☒ Delete
NAME **AUERBACH, MURIEL**
STREET ADDRESS **2914 PORT ROYALE LANE**
CITY-ST-ZIP **FORT LAUDERDALE FL 33308**

TITLE **PD** ☐ Change ☒ Addition
NAME **HUNT, CHERYL**
STREET ADDRESS **2917 Port Royale Lane**
CITY-ST-ZIP **Fort Lauderdale, Fla 33308**

TITLE **D** ☒ Delete
NAME **BRISTOL, RICHARD**
STREET ADDRESS **2922 PORT ROYALE LANE**
CITY-ST-ZIP **FORT LAUDERDALE FL 33308**

TITLE **VPD** ☐ Change ☒ Addition
NAME **SCHLEENBAKER, DOUG**
STREET ADDRESS **2915 Port Royale Lane**
CITY-ST-ZIP **Fort Lauderdale, Fla 33308**

TITLE **PD** ☒ Delete
NAME **ROWLAND, EDWARD**
STREET ADDRESS **2920 PORT ROYALE LN**
CITY-ST-ZIP **FT LAUDERDALE FL**

TITLE **TD** ☐ Change ☒ Addition
NAME **MILO, SANDRA**
STREET ADDRESS **2919 Port Royale Lane**
CITY-ST-ZIP **Fort Lauderdale, Fla 33308**

TITLE **D** ☐ Delete
NAME **GEIGER, PEARL**
STREET ADDRESS **2911 PORT ROYALE LANE**
CITY-ST-ZIP **FORT LAUDERDALE FL 33308**

TITLE **D** ☐ Change ☒ Addition
NAME **BYAL, JANE**
STREET ADDRESS **2913 Port Royale Lane**
CITY-ST-ZIP **Fort Lauderdale, Fla. 33308**

TITLE **TD** ☐ Delete
NAME **SCOTT, JUDITH**
STREET ADDRESS **2932 PORT ROYALE LN**
CITY-ST-ZIP **FT. LAUDERDALE FL**

TITLE **D** ☒ Change ☐ Addition
NAME **NIKIFROS, KRISTA**
STREET ADDRESS **2916 Port Royale Lane**
CITY-ST-ZIP **Fort Lauderdale, Fla 33308**

TITLE **D** ☒ Delete
NAME **SANCHEZ, GEORGE**
STREET ADDRESS **2918 PORT ROYALE LN**
CITY-ST-ZIP **FT. LAUD. FL**

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)