

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N93000001232

1. Entity Name

CYPRESS ISLE ESTATES AT BREAKERS WEST HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

1560 FLAGLER PKWY
WEST PALM BEACH FL 33411
US

1560 FLAGLER PKWY
WEST PALM BEACH FL 33411
US

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

65-0417235

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

BARBARA, DAVIS N
107 HERON PARKWAY
ROYAL PALM BCH., FL 33411

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

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 PD
NAME CHANDRA, ATESH
STREET ADDRESS 1688 BREAKERS WEST BLVD
CITY-ST-ZIP WEST PALM BEACH FL 33411 ☒ Delete

TITLE PRESIDENT
NAME DOUGLAS MCMILLEN
STREET ADDRESS 1719 CYPRESS ROW DRIVE, WEST PALM BEACH FL
CITY-ST-ZIP 33411 ☒ Change ☐ Addition

TITLE VPD
NAME DAVIS, BARBARA
STREET ADDRESS 107 HERON PARKWAY
CITY-ST-ZIP ROYAL PALM BEACH FL 33411 ☒ Delete

TITLE VICE PRESIDENT
NAME JOHN MAHONEY
STREET ADDRESS 1154 BREAKERS WEST BLVD., W.P.B., FL
CITY-ST-ZIP 33411 ☒ Change ☐ Addition

TITLE ST
NAME CATAPANO, JODI
STREET ADDRESS 1701 N FLAGLER DR #307
CITY-ST-ZIP WEST PALM BEACH FL 33407 ☒ Delete

TITLE SEC/TRES.
NAME RICHARD ALLENSON
STREET ADDRESS 1712 CYPRESS ROW DRIVE, W.P.B., FL
CITY-ST-ZIP 33411 ☒ Change ☐ Addition

TITLE ST
NAME MILLS, CHRISTINE R
STREET ADDRESS 7124 VENETIAN WAY
CITY-ST-ZIP WEST PALM BCH FL 33406 ☒ Delete

TITLE DIRECTOR
NAME BARBARA DAVIS
STREET ADDRESS 107 HERON PARKWAY
CITY-ST-ZIP ROYAL PALM BEACH, FL 33411 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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: *Barbara Davis* SIGNATURE OF REGISTERED AGENT

1/9/02 (561) 653-6306

Date Daytime Phone #

0033223

CR2E037 (9/01)