

# 2000 UNIFORM BUSINESS REPORT (UBR)

2/5/00-90005-033-\$61.25-\$61.25

DOCUMENT # N95000001159

1. Entity Name

ESTANCIA PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business

% PHOENIX MANAGEMENT  
541 S. STATE ROAD 7 #12  
MARGATE FL 33068  
US

Mailing Address

% PHOENIX MANAGEMENT  
541 S. STATE ROAD 7 #12  
MARGATE FL 33068-1711  
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

65-0564449

Applied For

Not Applied For

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

KATZMAN & KORR, P.A.  
1100 SOUTH STATE RD. 7  
SUITE 102  
MARGATE FL 33068

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 re-registering)

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

T D ☐ Delete  
NAME ROBERT A FERNANDEZ  
STREET ADDRESS 350 SW 187TH AVE  
CITY-ST-ZIP PEMBROKE PINES FL 33029

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

D ☐ Delete  
NAME NAPLES, DONNA  
STREET ADDRESS 477 SW 191 TERRACE  
CITY-ST-ZIP PEMBROKE PINES FL 33029

vp ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

P / D ☐ Delete  
NAME BAREA, ROBERT  
STREET ADDRESS 337 SW 185 TERRACE  
CITY-ST-ZIP PEMBROKE PINES FL 33029

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

VD / D ☒ Delete  
NAME MILLER, OSVALDO C  
STREET ADDRESS 18440 SW 4 STREET  
CITY-ST-ZIP PEMBROKE PINES FL 33029

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

S / D ☐ Delete  
NAME RAMON DIAZ  
STREET ADDRESS 18530 SW 4TH ST  
CITY-ST-ZIP PEMBROKE PINES FL 33029

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

☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☒ Addition  
NAME HAROLD CUTLER  
STREET ADDRESS 369 SW 192 AVE.  
CITY-ST-ZIP PEMBROKE PINES, FL 33029

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:

*ROBERT A FERNANDEZ*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/26/00

954-432-5625

Date

Daytime Phone #