2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 11, 2001 8:00 am
Secretary of State
05-11-2001 90314 027 ****61.25

DOCUMENT # N95000005951

1. Entity Name

BREAKERS POINTE HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1826 BREAKERS POINTE WAY WEST PALM BEACH FL 33411 US	~~4300 PGA BOULEVARD~~ ~~SUITE 100~~ ~~WEST PALM BEACH FL 33411~~ ~~US~~

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1799 Breakers Pointe Way Suite, Apt. #, etc.	Associated Property Management Suite, Apt. #, etc. Suite 10, 400 S. Dixie Hwy
City & State: West Palm Beach	City & State: Lake Worth, FL
Zip: 33411 Country: US	Zip: 33460 Country: US

4. FEI Number 65-0635328 ☐ 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
~~KAY, JOHN~~ ~~1826 BREAKERS POINTE WAY~~ ~~WEST PALM BEACH FL 33411~~	Name: ISABELLA F. POIRIER Street Address (P.O. Box Number is Not Acceptable): 1799 Breakers Pointe Way City: W. Palm Beach FL Zip Code: 33411

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: Isabella Poirier, Pres. DATE: April 30 2001
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	~~VD~~ ~~KAY, JOHN~~ ~~1826 BREAKERS POINTE WAY~~ ~~WEST PALM BEACH FL 33411~~	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President PD ISABELLA F. POIRIER 1799 Breakers Pointe Way W. Palm Beach, FL 33411	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~TD~~ ~~ROLES, RICHARD~~ ~~1757 BREAKERS POINTE WAY~~ ~~WEST PALM BEACH FL 33411~~	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President VD Sybil Lubin 1854 Breakers Pointe Way W. Palm Beach, FL 33411	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~SD~~ ~~BRUDAGE, BIADIE~~ ~~1728 BREAKERS PT WAY~~ ~~WEST PALM BEACH FL 33411~~	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary SD William Hartman 1924 Breakers Pointe Way W. Palm Beach, FL 33411	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~ISABELLA F. POIRIER~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer TD Cyril Waynik 1956 Breakers Pointe Way West 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

CR2E037 (10/00)

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: Isabella Poirier Pres. April 30, 2001 561-753-6226
ELECTRONICALLY FILED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #