

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000001611

1. Entity Name

DOLPHIN ISLES HOMEOWNER'S ASSOCIATION, INC.

FILED

Mar 24, 2000 8:00 am  
Secretary of State

03-24-2000 90124 047 \*\*\*\*61.25

Principal Place of Business

3025 NE 22ND STREET  
FORT LAUDERDALE FL 33305

Mailing Address

3025 NE 22ND STREET  
FORT LAUDERDALE FL 33305-1825

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0668035

Applied For

Not Applicable

Zip

Country

Zip

Country

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

FENGLER, MAUREEN  
3031 NE 22ND. STREET  
FORT LAUDERDALE FL 33305

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 TD  
NAME DUNCAN SAMPSON  
STREET ADDRESS 2013 NE 32ND AVE  
CITY-ST-ZIP FORT LAUDERDALE FL 33305 ☐ Delete

TITLE TD  
NAME Steve Sopronyi  
STREET ADDRESS 2007 N.E. 32 Ave.  
CITY-ST-ZIP Fort Lauderdale, Fl. 33305 ☐ Change ☐ Addition

TITLE CSD  
NAME BALLBACK, JOHN  
STREET ADDRESS 3200 N.E. 19 STREET  
CITY-ST-ZIP FORT LAUDERDALE FL 33305 ☐ Delete

TITLE CSD  
NAME Richard Moore  
STREET ADDRESS 1924 N.E. 31 Ave.  
CITY-ST-ZIP Fort Lauderdale, Fl. 33305 ☐ Change ☐ Addition

TITLE RSD  
NAME FARCAS, GEORGE  
STREET ADDRESS 2012 N.E. 31 AVENUE  
CITY-ST-ZIP FORT LAUDERDALE FL 33305 ☐ Delete

TITLE RSD  
NAME James Botsford  
STREET ADDRESS 2011 N.E. 31 Ave  
CITY-ST-ZIP Fort Lauderdale, Fl. 33305 ☐ Change ☐ Addition

TITLE PD  
NAME DEANER, LEANORE  
STREET ADDRESS 3025 NE 22ND STREET  
CITY-ST-ZIP FORT LAUDERDALE FL 33305 ☐ Delete

TITLE PD  
NAME Leanore Deaner  
STREET ADDRESS 3025 N.E. 22 St.  
CITY-ST-ZIP Fort Lauderdale, Fl. 33305 ☐ Change ☐ Addition

TITLE VPD  
NAME CARR, THOM  
STREET ADDRESS 2411 NE 32ND. AVENUE  
CITY-ST-ZIP FORT LAUDERDALE FL 33305 ☐ Delete

TITLE VPD  
NAME Thom Carr  
STREET ADDRESS 2411 N.E. 32 Ave  
CITY-ST-ZIP Fort Lauderdale, Fl. 33305 ☐ 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: Leanore Deaner, PRES. Leanore Deaner 3/26/2000 (954) 563-7525