

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 05, 2001 8:00 am
Secretary of State

03-05-2001 90310 019 ****61.25

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DO NOT WRITE IN THIS SPACE

DOCUMENT # N96000004592
1. Entity Name
 WYNDHAM LAKES NORTH HOMEOWNERS' ASSOCIATION, INC. ✓

Principal Place of Business
 c/o Diversified Mgmt
 8457 W. Oakland Park Blvd.
 Sunrise, FL 33351

Mailing Address
 c/o Diversified Mgmt Svc
 P.O. Box 451418
 Sunrise, FL 33345

2. Principal Place of Business
 90 Castle Mgmt, Inc.
 Suite, Apt. #, etc.
 P.O. Box 189013
 City & State
 Plantation, FL
 Zip
 33318
 Country
 US

3. Mailing Address
 90 Castle Mgmt Inc.
 Suite, Apt. #, etc.
 P.O. Box 189013
 City & State
 Plantation, FL
 Zip
 33318
 Country
 US

4. FEI Number
 65-0705026
 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
 Kaye and Roger, PA
 6261 NW 6th Way
 Suite 103
 Ft. Lauderdale, FL 33309

7. Name and Address of New Registered Agent
 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 _____ **DATE** _____
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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
PD	Janice, Barbara	5537 NW 124th Avenue	Coral Springs, FL	<input checked="" type="checkbox"/>
VD	Ryan, Greg	12439 NW 56th Court	Coral Springs, FL	<input checked="" type="checkbox"/>
SD	Robbin, Tracey	12359 NW 56th Court	Coral Springs, FL	<input checked="" type="checkbox"/>
TD	Barbuto, John	5552 NW 125th Terrace	Coral Springs, FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
PD	Weissbaum, Jean	12464 NW 55 St.	Coral Springs, FL	<input type="checkbox"/>	<input checked="" type="checkbox"/>
SD	VARGA, EDITH	5562 NW 124th Ave	Coral Springs, FL	<input type="checkbox"/>	<input checked="" type="checkbox"/>
TD	KLEINER, TINA	12339 NW 55 St.	Coral Springs, FL	<input type="checkbox"/>	<input checked="" type="checkbox"/>
VD				<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Norberto, Angelo	12306 NW 55 St.	Coral Springs, FL	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: J. Weissbaum Jean Weissbaum, President 2/2/01 (954) 792-6000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (11/00)