2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N9800000902

1. Entity Name



FILED Mar 19, 2003 8:00 am Secretary of State 03-19-2003 90100 023 ****61.25

N, INC.	INTE AT WYNDHAM LAKES COM	MMUNITY ASSOCIA	NTIO		03 1	2002 20100 0	. 2 5	- 1- -
1215 E HILLSBORO BLVD 121		Mailing Address 1215 HILLSBORO BLVD DEERFIELD BEACH FL 334 US	441					
2. Principal	Place of Business	3. Mailing Address	<u> </u>					
		o. Maning Address		1		011 68 51 68 11 68 11 68 11	40 60 6 4	60 0 07 00
Suite, Apt. #, etc.		Suite, Apt. #, etc.			□ СНЕ	ECK HERE IF MAKI	NG CHANGI	ES
City & State		City & State			4. FEI Number 65-0824704			Applied For
Zip Country		Zip Country			5. Certificate of Status	S Desired	\$8.75	Not Applicable Additional
	6. Name and Address of Current Re	gistered Agent	<u> </u>		7. Name and Addres		Fee Requ	ired
			Name		7. Name and Address	s or New Registere	d Agent	
Campbell Prop MgMT. 1215 e Hillsboro Blvd			Street Address		(P.O. Box Number is Not Acceptable)			
	ELD BEACH FL 33441					m/- H	.,	
			City			F	Zip Co	ode
8. The abov	re named entity submits this statement for the ations of registered agent.	e purpose of changing its	registered office of	or registered	agent, or both, in the			h, and accept
the obliga	alions of registered agent.							. }
SIGNATURE								
	Signature, typed or printed name of registered agent and t	itle if applicable. (NOT)	E: Registered Agent signa	ature required wh	nen reinstating)	DATE	 	
	FILE NOW: FEE IS \$61.25		mpaign Financing Contribution.		55.00 May Be	Make Che Florida Depa	ck Payabl	e to State
10. ε	OFFICERS AND DIREC	9. Election Car Trust Fund C		AD AD	dded to Fees DIT(ONS/CHANGES T	Florida Depa	ck Payablertment of	State
	OFFICERS AND DIRECTOR TD RAPPOPORT, JORDAN 12255 NW 49 AVE	9. Election Car Trust Fund C	11. TITLE NAME STREET ADDRESS	HO PIC	DITIONS/CHANGEST	Florida Depa O OFFICERS AND E Deficie	ck Payable artment of DIRECTORS Change	State
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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 although the empowered.

SIGNATURE:

954-650-2908