## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED Feb 21, 2000 8:00 am Secretary of State DOCUMENT # **758560** 1. Entity Name DORCHESTER AT POINCIANA CONDOMINIUM ASSOCIATION, 02-21-2000 90037 049 \*\*\*\*61.25 Mailing Address Principal Place of Business % PMS CORP. % PMS CORP. 3150 VIA POINCIANA DRIVE 3150 VIA POINCIANA DRIVE LAKE WORTH FL 33467 LAKE WORTH FL 33467-1483 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-2166052 Not Applicable Zip Country \$8.75 Additional Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) -PROPERTY: MGMT. SERVICES ----8299 CORAL WAY MIAMI FL 33155 City 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) Make Check Payable to 9. Election Campaign Financing FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. Change ☐ Addition D TITI F TITLE **∫** De etc NAME GLAZER, LEWIS NAME STREET ADDRESS STREET ADDRESS 3286 ARCARA WAY #409 CITY-ST-ZIP CITY-ST-ZIP LAKE WORTH FL 33467 Delete TITLE TITLE NAME DANIELS, ELEANOR NAME DANIEL STREET ADDRESS STREET ADDRESS ABCARA WAI 3286 ARCARA WAY CITY-ST-ZIF CITY-ST-ZIP LAKE WORTH FL 33467 TACASURER Delete TITLE TITLE AGRAHAM LAZAR # 306 NAME CHAUSS, DONALD NAME -STREET ADDRESS STREET ADDRESS 3286 ARCARA WAY CITY-ST-ZIP CITY-ST-ZIP Writh, 41 <u>Lake worth FL 33467</u> 1 DENT Delete TITLE DT TITLE NAME JACK BOOND WEXLER, IRV NAME ANCALA WAY # 307 STREET ADDRESS STREET ADDRESS 3286 ARCARA WAY CITY-ST-ZIP CITY-ST-ZIP lake worth fl VICE PRESIDENT ☐ Change Delete TITLE TITLE NAME FELDMAN FELDMAN, HERB NAME STREET ADDRESS STREET ADDRESS 3286 ARCARA WAY CITY-ST-ZIP CITY-ST-ZIP LAKE WORTH FL 33467 Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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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 17, 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 life emprived d.

SIGNATURE:

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED CAPRINTED MANE OF SIGNING OFFICER OF DIRECTOR

Days of the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(i) in Section 119.07(i) in Section 119.07(i) in Section 119.07(i) in Sect