

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 745463

1. Entity Name

IRONWEDGE PROPERTY OWNERS ASSOCIATION, INC.

FILED

Jun 03, 2000 8:00 am
Secretary of State

06-03-2000 90143 041 ****61.25

Principal Place of Business

Mailing Address

% NORDE MANAGEMENT CORP.,
6047 KIMBERLY BLVD., SUITE N
N. LAUDERDALE FL 33068

% NORDE MANAGEMENT CORP.,
6047 KIMBERLY BLVD., SUITE N
N. LAUDERDALE FL 33068-2820

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2005862

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

KOTLER, MICHAEL
1800 CORPORATE BLVD.
STE-300
BOCA RATON FL 33431

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 PD ☐ Delete
NAME MONTROSE, JUDITH A.
STREET ADDRESS 5990 GLENDALE DRIVE
CITY-ST-ZIP BOCA RATON FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☐ Delete
NAME VULPIS, SAMUEL R.
STREET ADDRESS 22864 IRONWEDGE DRIVE
CITY-ST-ZIP BOCA RATON FL

TITLE TREA. ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Delete
NAME MOSHER, JOHN W.
STREET ADDRESS 5992 GLENDALE DR
CITY-ST-ZIP BOCA RATON FL

TITLE D ☒ Change ☐ Addition
NAME JUHL, JAMES
STREET ADDRESS 22911 IRONWEDGE DR.
CITY-ST-ZIP

TITLE TD ☒ Delete
NAME CANTER, NEIL J.
STREET ADDRESS 22878 IRONWEDGE DRIVE
CITY-ST-ZIP BOCA RATON FL

TITLE VP ☒ Change ☐ Addition
NAME MAIDAN, RIFKA
STREET ADDRESS 22960 IRONWEDGE DR.
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SEC. ☐ Change ☒ Addition
NAME STEIN, CAROL
STREET ADDRESS 6027 GLENDALE DRIVE
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)