

2000 UNIFORM BUSINESS REPORT (UBR)

4/2

FILED
May 22, 2000 8:00 am
Secretary of State

04-22-2000 90120 043 ****61.25

DOCUMENT # N98000000911

1. Entity Name

THE VINEYARDS OF BOCA RATON HOME OWNERS ASSOCIAT

Principal Place of Business

1499 WEST PALMETTO PARK ROAD #200
BOCA RATON FL 33486

Mailing Address

1499 WEST PALMETTO PARK ROAD #200
BOCA RATON FL 33486-3321

2. Principal Place of Business

951 Broken Sound Parkway

3. Mailing Address

951 Broken Sound Parkway

Suite, Apt. #, etc.

Suite 250

Suite, Apt. #, etc.

Suite 250

City & State

Boca Raton FL

City & State

Boca Raton FL

Zip

33487

Country

USA

Zip

33487

Country

USA

6. Name and Address of Current Registered Agent

EISENSTEIN, NEIL

1499 WEST PALMETTO PARK ROAD #200
BOCA RATON FL 33486

7. Name and Address of New Registered Agent

Name

Community Ass'n. Sec.

Street Address (P.O. Box Number is Not Acceptable)

951 Broken Sound Pkwy #250

City

Boca Raton

FL

Zip Code

33487

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

TITLE ☐ Delete

NAME **VD**
KODSI, ISAAC
STREET ADDRESS **1499 WEST PALMETTO PARK ROAD #200**
CITY-ST-ZIP **BOCA RATON FL 33486**

TITLE ☐ Delete

NAME **PSTD**
KODSI, DANIEL
STREET ADDRESS **1499 WEST PALMETTO PARK ROAD #200**
CITY-ST-ZIP **BOCA RATON FL 33486**

TITLE ☒ Delete

NAME **D**
BAROFSKY, STEVE
STREET ADDRESS **1499 WEST PALMETTO PARK RD, #200**
CITY-ST-ZIP **BOCA RATON FL 33486**

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition

NAME **David Tempkin**
STREET ADDRESS **1499 W. Palmetto Park Rd #200**
CITY-ST-ZIP **Boca Raton, FL 33486**

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

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:

DANIEL KODSI

4/12/00

561-347-6844

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)