

2000 UNIFORM BUSINESS REPORT (UBR)

5

DOCUMENT # N94000001191
 Entity Name The Shores at Boca Raton, H.O.A, Inc.

FILED

00 DEC -12 PM 4:05

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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-12/27/00--01078--025

*****35.00 *****35.00

Amended

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
18900 Ocean Mist Dr. Same
Boca Raton, Fl. 33498

2. Principal Place of Business 3. Mailing Address
18900 Ocean Mist Dr, Boca Raton, FL Same
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
Boca Raton, Fl. Same
 Zip Country Zip Country
33498 Palm Beach Same Same

4. FEI Number Applied For
05-0536881 Not Applicable
 5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
William K. Isaacson
Lang Management
5295 Town Center Road #200
Boca Raton, Fl. 33486

7. Name and Address of New Registered Agent
Jeffrey A. Winikoff db Stein Rosenberg Winikoff PA
 Street Address (P.O. Box Number is Not Acceptable)
4875 N. Federal Hwy. 7th Floor
 City FL Zip Code 33308
Ft. Lauderdale

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 Jeffrey A. Winikoff attys at law 11/30/00
 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
 After September 13, 2000 min. will be \$236.25

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	<u>President P/D</u>	☒ Delete
NAME	<u>Murray Levine</u>	
STREET ADDRESS	<u>10600 Blue Coral Dr.</u>	
CITY-ST-ZIP	<u>Boca Raton, Fl. 33498</u>	
TITLE	<u>VP/D</u>	☒ Delete
NAME	<u>Norman Kaufman</u>	
STREET ADDRESS	<u>18625 Ocean Mist Dr.</u>	
CITY-ST-ZIP	<u>Boca Raton, Fl. 33498</u>	
TITLE	<u>S/D</u>	☒ Delete
NAME	<u>Peter Bergman</u>	
STREET ADDRESS	<u>18637 Ocean Mist Dr.</u>	
CITY-ST-ZIP	<u>Boca Raton, Fl. 33498</u>	
TITLE	<u>T/D</u>	☒ Delete
NAME	<u>Charles Bolanowski</u>	
STREET ADDRESS	<u>18657 Harbor Light Way</u>	
CITY-ST-ZIP	<u>Boca Raton, Fl. 33498</u>	
TITLE	<u>Asst/T</u>	☒ Delete
NAME	<u>Karen Hochberg</u>	
STREET ADDRESS	<u>18609 Harbor Light Way</u>	
CITY-ST-ZIP	<u>Boca Raton, Fl. 33498</u>	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	<u>President = P/D</u>	☒ Change ☐ Addition
NAME	<u>Peter Bergman</u>	
STREET ADDRESS	<u>18637 Ocean Mist Dr.</u>	
CITY-ST-ZIP	<u>Boca Raton, Fl. 33498</u>	
TITLE	<u>VP/D</u>	☒ Change ☐ Addition
NAME	<u>Lois Perlmutter</u>	
STREET ADDRESS	<u>18616 Ocean Mist Dr.</u>	
CITY-ST-ZIP	<u>Boca Raton, Fl. 33498</u>	
TITLE	<u>S/D</u>	☒ Change ☐ Addition
NAME	<u>Syb Pastor</u>	
STREET ADDRESS	<u>18584 Harbor Light Way</u>	
CITY-ST-ZIP	<u>Boca Raton, Fl. 33498</u>	
TITLE	<u>T/D</u>	☒ Change ☐ Addition
NAME	<u>Melissa Lee</u>	
STREET ADDRESS	<u>18540 Ocean Mist Dr</u>	
CITY-ST-ZIP	<u>Boca Raton, Fl. 33498</u>	
TITLE	<u>Asst S/Asst T/D</u>	☒ Change ☐ Addition
NAME	<u>Michael Kavanay</u>	
STREET ADDRESS	<u>18660 Ocean Mist Dr.</u>	
CITY-ST-ZIP	<u>Boca Raton, Fl. 33498</u>	
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: Syb Pastor Syb Pastor, Sect. 12/1/00 561-883-5240

CR2E037 (5/00)