

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 715711

1. Entity Name

TOWN HOUSE ESTATES HOME OWNERS' ASSOCIATION, INC

Principal Place of Business

100 EMERALD PLACE EAST
INDIAN HARBOUR BCH FL 32937

Mailing Address

100 EMERALD PLACE EAST
INDIAN HARBOUR BCH FL 32937

SAME

SAME

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1539862

Applied For

Not Applicable

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

BOGEN, CAROL A
412 EMERALD DRIVE SOUTH
INDIAN HARBOUR BEACH FL 32937

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

Carol A. Bogen

CAROL A. BOGEN

TREASURER

1-9-02

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
NAME PARTLOW, WILLIAM ☒ Delete
STREET ADDRESS 208 EMERALD DRIVE NORTH
CITY-ST-ZIP INDIAN HRBR BCH FL 32937

TITLE PD
NAME FONGEALLAZ WILLIAM ☒ Change ☒ Addition
STREET ADDRESS 331 EMERALD PLACE W.
CITY-ST-ZIP INDIAN HARBOUR BEACH FL 32937

TITLE VD
NAME FONGEALLAZ, WILLIAM ☒ Delete
STREET ADDRESS 331 EMERALD PLACE WEST
CITY-ST-ZIP INDIAN HRBR BCH FL 32937

TITLE VD
NAME EUGENE REBHOLZ ☒ Change ☒ Addition
STREET ADDRESS 328 EMERALD PL. W.
CITY-ST-ZIP INDIAN HARBOUR BEACH FL 32937

TITLE SD
NAME MAKOWSKI, GLORIA ☒ Delete
STREET ADDRESS 328 EMERALD PLACE WEST
CITY-ST-ZIP INDIAN HARBOUR BEACH FL 32937

TITLE SD
NAME DICK ROSE ☐ Change ☒ Addition
STREET ADDRESS 303 EMERALD PL. E.
CITY-ST-ZIP INDIAN HARBOUR BEACH, FL 32937

TITLE TD
NAME BOGEN, CAROL A ☐ Delete
STREET ADDRESS 412 EMERALD DRIVE SOUTH
CITY-ST-ZIP INDIAN HARBOUR BEACH FL 32937

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

TITLE D
NAME CAMPBELL, JOANN ☐ Delete
STREET ADDRESS 202 EMERALD DRIVE NORTH
CITY-ST-ZIP INDIAN HARBOUR BCH FL 32937

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

TITLE D
NAME ROGERS, MIA ☐ Delete
STREET ADDRESS 226 EMERALD DRIVE NORTH
CITY-ST-ZIP INDIAN HARBOUR BEACH FL 32937

TITLE D
NAME JOHN FISCELLA ☐ Change ☒ Addition
STREET ADDRESS 406 EMERALD DR. S.
CITY-ST-ZIP INDIAN HARBOUR BEACH FL 32937

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:

Carol A. Bogen

CAROL A. BOGEN

1-9-02

321-773-2566

CR2E037 (9/01)