

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 753632

1. Entity Name

NEW FLORESTA HOMEOWNERS' ASSOCIATION, INC.

FILED

Apr 16, 2002 8:00 am
Secretary of State

04-16-2002 90095 032 ****61.25

Principal Place of Business

Mailing Address

C/O HAWK-EYE MGMT INC
3901 N FED HWY SUITE 202
BOCA RATON FL 33431
US

C/O HAWK-EYE MGMT INC
3901 N FED HWY SUITE 202
BOCA RATON FL 33431
US

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

59-2746794

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

GELFAND, MICHAEL J., ESQ.
250 AUSTRALIAN AVE. S., SUITE 1010
WEST PALM BEACH FL 33401

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 SD
NAME ROSENFELD, JEFF
STREET ADDRESS 2795 NW 29TH AVE
CITY-ST-ZIP BOCA RATON FL 33434 ☐ Delete

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

TITLE VD
NAME CASTLE, JOHN
STREET ADDRESS 2615 NW 29TH DR
CITY-ST-ZIP BOCA RATON FL 33433 ☐ Delete

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

TITLE T
NAME JEFF COLEMAN
STREET ADDRESS 2551 N.W. 27TH STREET
CITY-ST-ZIP BOCA RATON FL ☐ Delete

TITLE BD
NAME David Sadaleka
STREET ADDRESS 2921 NW 29th Ave
CITY-ST-ZIP Boca, Raton, FL 33434 ☐ Change ☒ Addition

TITLE D
NAME ZONA, KAREN
STREET ADDRESS 2801 NW 26TH COURT
CITY-ST-ZIP BOCA RATON FL 33434 ☒ Delete

TITLE VD
NAME Doug Hammer
STREET ADDRESS 2940 NW 28th Terrace
CITY-ST-ZIP Boca Raton, FL. 33434 ☐ Change ☒ Addition

TITLE PD
NAME VAN TREESE, CLIFF
STREET ADDRESS 2713 NW 27TH AVENUE
CITY-ST-ZIP BOCA RATON FL 33434 ☒ Delete

TITLE D
NAME himi mangines
STREET ADDRESS 2911 NW 29th Ave
CITY-ST-ZIP Boca Raton, FL 33434 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE D
NAME Dan Picard
STREET ADDRESS 2790 NW 29th Ave
CITY-ST-ZIP Boca Raton, FL 33434 ☐ Change ☒ Addition

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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)