

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
AMENDED UBR

02 APR 16 AM 8:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N32415
1. Entity Name
CACHE HOMEOWNERS' ASSOCIATION, INC.

DO NOT WRITE IN THIS SPACE

800005452098--8
-05/06/02--01021--005
*****61.25 *****61.25

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
8789 Forest Hills Blvd
Suite, Apt. #, etc.

3. Mailing Address
8789 Forest Hills Bl
Suite, Apt. #, etc.

City & State
Coral Springs, FL

City & State
Coral Springs, FL

Zip
33065

Country
USA

Zip
33065

Country
USA

4. FEI Number
65-0180370

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
John Doucette

Street Address (P.O. Box Number is Not Acceptable)
8759 Forest Hills Blvd.

City
Coral Springs

FL

Zip Code
33065

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 *John Doucette*
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE 4/3/02

FEE IS \$61.25
Initial or Amended UBR

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 NAME STREET ADDRESS CITY - ST - ZIP	PD John Doucette 8759 Forest Hills Blvd. Coral Springs, FL 33065	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD Joel Dechter 8737 Forest Hills Blvd. Coral Springs, FL 33065	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD Eric Goodman 8767 Forest Hills Blvd. Coral Springs, FL 33065	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD Colin Murphy 8765 Forest Hills Blvd. Coral Springs, FL 33065	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD Etta Lee 8763 Forest Hills Blvd. Coral Springs, FL 33065	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TREAS. (non voting member) Barbara M. Lucas 8729 Forest Hills Blvd. Coral Springs, FL 33065	TITLE 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 on an attachment with an address, with all other like empowered.

SIGNATURE *John Doucette Pres.*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE 4/3/02
Date

DAYTIME PHONE #

CR2E037B (12/01)