

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000865

FILED  
Apr 23, 2012  
Secretary of State

**Entity Name:** VALENCIA POINTE MASTER ASSOCIATION, INC.

**Current Principal Place of Business:**

21045 COMMERCIAL TRAIL  
BOCA RATON, FL 33486

**New Principal Place of Business:**

**Current Mailing Address:**

21045 COMMERCIAL TRAIL  
BOCA RATON, FL 33486

**New Mailing Address:**

**FEI Number:** 20-2236224

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ISAACSON, WILLIAM K  
C/O LANG MANAGEMENT  
21045 COMMERCIAL TRAIL  
BOCA RATON, FL 33486 US

**Name and Address of New Registered Agent:**

PHILLIPS, CANTOR & SHALECK, P.A.  
C/O MARCIA RUBIN  
4000 HOLLYWOOD BLVD, SUITE 500N  
HOLLYWOOD, FL 33021 US

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: MARCIA RUBIN

04/23/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: LAZARUS, WILLIAM  
Address: 7094 SPRINGVILLE COVE  
City-St-Zip: BOYNTON BEACH, FL 33437

Title: 1VP  
Name: LEFF, RHONA  
Address: 7054 GREAT FALLS CIRCLE  
City-St-Zip: BOYNTON BEACH, FL 33437

Title: 2VP  
Name: KATZ, MARK  
Address: 7216 CORNING CIRCLE  
City-St-Zip: BOYNTON BEACH, FL 33437

Title: SD  
Name: RUBENSTEIN, IRV  
Address: 7102 GREAT FALLS CIRCLE  
City-St-Zip: BOYNTON BEACH, FL 33437

Title: TD  
Name: WITTCOFF, HAROLD  
Address: 10624 RICHFIELD WAY  
City-St-Zip: BOYNTON BEACH, FL 33437

Title: 2TD  
Name: WOLFBERG, STEVE  
Address: 10566 CONWAY TRAIL  
City-St-Zip: BOYNTON BEACH, FL 33437

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: WILLIAM LAZARUS

PD

04/23/2012

Electronic Signature of Signing Officer or Director

Date