

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Feb 21, 2003 8:00 am
Secretary of State

02-21-2003 90835 013 ****70.00

DOCUMENT # N01000005483

1. Entity Name
**SECRET POND P.U.D. HOMEOWNERS
ASSOCIATION, INC.**



Principal Place of Business
**C/O TOWN & COUNTRY BUILDERS
7300 W CAMINO
BOCA RATON, FL 33431**

Mailing Address
**C/O TOWN & COUNTRY BUILDERS
7300 W CAMINO
BOCA RATON, FL 33431**



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business
C/O A+N MANAGEMENT, INC
Suite, Apt. #, etc.
6413 CONGRESS AVE, STE 220

3. Mailing Address
C/O A+N MANAGEMENT, INC
Suite, Apt. #, etc.
6413 CONGRESS AVE, STE 220

City & State
BOCA RATON, FL

City & State
BOCA RATON, FL

Zip
33487

Country
P.B

Zip
33487

Country
P.B

4. FEI Number
59-3745097

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**KELLY, TIMOTHY R
C/O TOWN & COUNTRY BUILDERS
170 N W SPANISH RIVER BLVD
BOCA RATON, FL 33431**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent's 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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
KELLY, TIMOTHY R
2295 CORPORATE BLVD. N.W., SUITE 117
BOCA RATON, FL 33431** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DT
LILLER, STEPHEN B
2295 CORPORATE BLVD. N.W., SUITE 117
BOCA RATON, FL 33431** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DS
PLATT, RONALD L
2295 CORPORATE BLVD. N.W., SUITE 117
BOCA RATON, FL 33431** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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☐ 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:

Timothy R. Kelly, President

2/17/03

561-8930029

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/02)