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

Mar 17, 2003 8:00 am Secretary of State **DOCUMENT # 743849** 1. Entity Name 03-17-2003 90097 004 ****61.25 RAINBERRY BAY MASTER ASSOCIATION, INC. Principal Place of Business Mailing Address 2801 RAINBERRY CIRCLE SOUTH 2801 RAINBERRY CIRCLE SOUTH DELRAY BEACH FL 33445 DELRAY BEACH FL 33445 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number 59-1834405 Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WEBER SHARON A ESQ. Street Address (P.O. Box Number is Not Acceptable) BECKER POLIAKOFF 450 AUSTRALIAN AVE SO STE 720 WEST PALM BEACH FL 33401 (1987) City 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 signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 \$5.00 May Be Make Check Payable to \Box Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE ☐ Change Addition GOLDBERG, LARRY NAME NAME STREET ADDRESS 729D NW 29TH AVENUE STREET ADDRESS CITY-ST-ZIP DELRAY BOH FL CITY-ST-ZIP VPD TITLE ☐ Delete TITLE Change ☐ Addition GINTIS, DAN NAME

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Delray Beach, FL 33445

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Delete

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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:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

2710 RIVERA DRIVE

DELRAY BEACH FL-

DELRAY BEACH FL

3010 D NW 12TH STREET

FOX, SAM

FILED

Change

☐ Change

Addition

☐ Addition