


05-01-2003 90291 020 ****61.25

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

DOCUMENT # N45664
 1. Entity Name
 Clubside Pointe at Broken Sound
 Condominium Association, Inc.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3300 University Drive # 405 Suite, Apt. #, etc.	3. Mailing Address 3300 University Drive # 405 Suite, Apt. #, etc.
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DO NOT WRITE IN THIS SPACE

City & State Coral Springs, Fl.	City & State Coral Springs, FL	4. FEI Number 65-0291881	Applied For Not Applicable
Zip 33065	Country USA	Zip 33065	Country USA
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE	7. Name and Address of Current Registered Agent		
	Name	United Community Management Corp	
	Street Address (P.O. Box Number is Not Acceptable)	3300 University Drive # 405	
	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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *UNITED COMMUNITY MANAGEMENT CORP* *Bob Schultheis* *4/26/03*
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FEE IS \$61.25 Initial or Amended UBR	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Schultheis, Bob 2411 NW 59 St #203, Boca Raton, Fl. 33496	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD Nagler, Dick 2434 NW 59 St # 1403, Boca Raton, Fl. 33496	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Goldsmith, Jay 2441 NW 59 St # 503, Boca Raton, Fl. 33496	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Katz, Dan 2451 NW 59 St # 603, Boca Raton, Fl. 33496	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Saul, Edward 2454 NW 59 St # 1202, Boca Raton, Fl. 33496	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Simon, Jack 6741 Country Club Lane, W Bloomfield MI 48222	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: *Bob Schultheis Pres* *4/24/03* *561-994-370*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037B (12/02)

Attachment
20038561

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Suite, Apt. #, etc.

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City & State
Coral Springs, Fl.

City & State
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4. FEI Number 65-0291881

Applied For
 Not Applicable

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

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Name United Community Management Corp

Street Address (P.O. Box Number is Not Acceptable)
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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. I am familiar with, and accept the obligations of registered agent.

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Make Check Payable to Florida Department of State

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SIGNATURE: *Bob Schultheis* 4/24/03 56-9943710
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone

8-DAY FILE SIGN

CR2E037B (12/02)