

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 03, 2001 8:00 am
Secretary of State

04-03-2001 90004 004 ****61.25

DOCUMENT # 714194

1. Entity Name

NORTH HAMPTON COURT ASSOCIATION, INC.

Principal Place of Business

Mailing Address

1965 S.E. 5TH COURT
 POMPANO BEACH FL 33060
 US

1965 S.E. 5TH CT.
 POMPANO BEACH FL 33060
 US

818-9.97



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

CDS MANAGEMENT & REAL ESTATE GROUP, INC.

DO NOT WRITE IN THIS SPACE

City & State

PLANTATION FL 33318-7534

4. FEI Number

59-1287502

Applied For

Not Applicable

Zip

Country

33318-7524

USA

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GLASSER, DELITE
490 SE 19TH AVE N. W101
POMPANO BEACH FL 33060-7666

CDS Management & Real Estate Group Inc
 Street Address (P.O. Box Numbers Not Acceptable)
300 South Pine Island Road
 Suite 212
 City **Plantation** FL **33324**

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

Carol D. Schechter President **CDS Management & Real Estate Group Inc**
 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE **3/29/01**

FILE NOW:
FEE IS \$61.25

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT GLASSER, DELITE 490 S.E. 19TH AVE POMPANO BEACH FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS DUFF, MARY 1965 SE 5TH CT. POMPANO BEACH FL 33060	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV WYHTE, DONALD 1965 SE 5TH COURT POMPANO BEACH FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP CARUSO, JOSEPH 1971 SE 5TH COURT POMPANO BEACH FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MULLER, ANNA 1971 SE 5TH COURT POMPANO BEACH FL 33060	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS VOLKMAN JOAN 1965 SE 5TH CT POMPANO BEACH FL 33060	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHWARZBAUGH JASON 490 SE 19TH AVE POMPANO BEACH FL 33060	☐ 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:

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/28/01

Date

Daytime Phone #

CR2E037 (10/00)