

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 719249

1. Entity Name

MIAMI LAKES GOLF COURSE VILLAGE HOMEOWNERS' ASSO

FILED
Apr 29, 2000 8:00 am
Secretary of State

04-29-2000 90008 013 ****61.25

Principal Place of Business

Mailing Address

7431 BIG CYPRESS DR
MIAMI LAKES FL 33014
US

7431 BIG CYPRESS DR
MIAMI LAKES FL 33014-2556
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2376040

Applied For

Not Applicable

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

DEJAFFE, RUSSELL
7431 BIG CYPRESS DR
MIAMI LAKES FL 33014-9507

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.

SIGNATURE

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

(NOTE: Registered Agent 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
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME DEJAFFE, RUSSELL
STREET ADDRESS 7431 BIG CYPRESS DR
CITY-ST-ZIP MIAMI LAKES FL 33014

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

TITLE SD ☐ Delete
NAME CIFUENTOS, LUCY
STREET ADDRESS 7430 BIG CYPRESS DR
CITY-ST-ZIP MIAMI LAKES FL 33014

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

TITLE TD ☐ Delete
NAME GLADYS VEGA
STREET ADDRESS 7423 BIG CYPRESS DR
CITY-ST-ZIP MIAMI LAKES FL

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

TITLE D ☒ Delete
NAME RICHARD L. DEPROSPERO
STREET ADDRESS 7366 BIG CYPRESS DR
CITY-ST-ZIP MIAMI LAKES FL

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

TITLE D ☐ Delete
NAME GAINES, NANCY
STREET ADDRESS 7422 BIG CYPRESS DR
CITY-ST-ZIP MIAMI LAKES FL

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *RUSSELL DEJAFFE* **305-558-9064**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **RUSSELL DEJAFFE** 4-20-00

Date

Daytime Phone #

CR2E037 (9/99)