

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2001 8:00 am
Secretary of State
 05-16-2001 90366 021 ****61.25

DOCUMENT # 721268

1. Entity Name

COLONIAL CLUB CONDOMINIUM ASSOC. SEC 1, INC.

Principal Place of Business

**26 COLONIAL CLUB DRIVE
 BOYNTON BEACH FL 33435
 US**

Mailing Address

**500 NE SPANISH RIVER BLVD
 18
 BOCA RATON FL 33431
 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

59-1534387

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

**WILLIS, ERNEST W
 500 NE SPANISH RIVER BLVD STE 18
 BOCA RATON FL 33431**

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 ☒ Delete
 NAME **TD**
 STREET ADDRESS **STRUNKS, RITA**
 CITY-ST-ZIP **7 COLONIAL CLUB DR #303
 BOYNTON BEACH FL 33435**

TITLE ☐ Change ☒ Addition
 NAME **VD**
 STREET ADDRESS **Clarke, Eileen**
 CITY-ST-ZIP **6 Colonial Club Dr #104
 Boynton Beach, FL 33435**

TITLE ☒ Delete
 NAME **PD**
 STREET ADDRESS **DOHERTY, JOHN**
 CITY-ST-ZIP **20 COLONIAL CLUB DR #104
 BOYNTON BEACH FL 33435**

TITLE ☐ Change ☒ Addition
 NAME **TD**
 STREET ADDRESS **Pratt, Richard**
 CITY-ST-ZIP **33 Colonial Club Dr
 Boynton Beach, FL 33435**

TITLE ☐ Delete
 NAME **DVP**
 STREET ADDRESS **MEYER, MARGARET**
 CITY-ST-ZIP **11 COLONIAL CLUB DRIVE #100
 BOYNTON BEACH FL 33435**

TITLE ☒ Change ☐ Addition
 NAME **PD**
 STREET ADDRESS **Meyer, Margaret**
 CITY-ST-ZIP **11 Colonial Club Dr #100
 Boynton Beach, FL 33435**

TITLE ☐ Delete
 NAME **TD**
 STREET ADDRESS **VULTAGGIO, FRANK**
 CITY-ST-ZIP **5 COLONIAL CLUB DR #302
 BOYNTON BEACH FL 33435**

TITLE ☒ Change ☐ Addition
 NAME **SD**
 STREET ADDRESS **Vultaggio, Frank**
 CITY-ST-ZIP **5 Colonial Club Dr #200
 Boynton Beach, FL 33435**

TITLE ☒ Delete
 NAME **D**
 STREET ADDRESS **BOYLE, MARGARET**
 CITY-ST-ZIP **19 COLONIAL CLUB DR #200
 BOYNTON BEACH FL 33435**

TITLE ☐ Change ☒ Addition
 NAME **D**
 STREET ADDRESS **Reinhold, Peter**
 CITY-ST-ZIP **7 Colonial Club Dr
 Boynton Beach, FL 33435**

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **MASTERMAN, JILL**
 CITY-ST-ZIP **#9-101 COLONIAL CLUB DRIVE
 BOYNTON BCH FL**

TITLE ☐ Change ☐ Addition
 NAME **D**
 STREET ADDRESS **MASTERMAN, JILL**
 CITY-ST-ZIP **#9-101 COLONIAL CLUB DRIVE
 BOYNTON BCH FL**

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
MARGARET MEYER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)