2000 UNIFORM BUSINESS REPORT (UBR)

FILED **DOCUMENT # 725235** Feb 20, 2000 8:00 am 1. Entity Name **Secretary of State** VILLAGE ROYALE GREENDALE ASSOCIATION, INC. 02-20-2000 90027 047 ****61.25 Principal Place of Business Mailing Address 2601 N E 3RD COURT 2601 N E 3RD COURT BOYNTON BEACH FL 33435-2149 **BOYNTON BEACH FL 33435** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-1537163 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) WAXMAN, JACK 2601 NE 3RD CT APT 209 **BOYNTON BCH FL 33435** 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 9. Election Campaign Financing Make Check Payable to FILE NOW: **\$5.00** May Be Trust Fund Contribution. FEE IS \$61.25 Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Delete PD TITLE TITLE STANLEY SORGMAN APT. 204 RAUCHWERG, FRED NAME NAME STREET ADDRESS STREET ADDRESS 2601 NE 3RD COURT BOYNTON BEACH FL 33435 CITY-ST-ZIP CITY-ST-ZIP BOYNTON BCH, FL 00000 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME BERKOWITZ, NAT NAME STREET ADDRESS STREET ADDRESS 2601 NE 3 CT. CITY-ST-ZIP CITY-ST-ZIP **BOYNTON BEACH FL** Change ☐ Addition TITLE SD ---☐ Delete TITLE WAXMAN, JACK NAME NAME STREET ADDRESS STREET ADDRESS 2601 NE 3RD COURT CITY-ST-ZIP CITY-ST-ZIP BOYNTON BCH, FL 00000 ☐ Change ☐ Addition ☐ Delete TITLE BARNICK, GERALDINE NAME NAME STREET ADDRESS STREET ADDRESS 2601 NE 3RD COURT CITY-ST-ZIP CITY-ST-ZIP BOYNTON BCH FL ☐ Delete Change ☐ Addition TITLE VD. TITLE NAME SORGMAN, STANLEY NAME STREET ADDRESS STREET ADDRESS 2601 NE 3 RD CT CITY-ST-ZIP CITY-ST-ZIP **BOYNTON BEACH FL 33435** ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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.

2-2-2000 56/- 13/- 0

AND YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR