

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 728881

1. Entity Name

COUNTRY CLUB POINTE PROPERTY OWNER'S ASSOCIATION

FILED
Feb 20, 2000 8:00 am
Secretary of State

02-20-2000 90052 039 ****61.25

Principal Place of Business

Mailing Address

3009 GOLFVIEW DRIVE
VERO BEACH FL 32960
US

3009 GOLFVIEW DRIVE
VERO BEACH FL 32960-4990
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2244916

Applied For

Not Applicable

Zip

Country

Zip

Country

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

RHODES, SOPHIE
3009 GOLFVIEW DRIVE
VERO BEACH FL 32960

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

(NOTE: Registered Agent signature required when reinstating)

DATE

2/12/2000

**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 SILVESTRI, JIM
STREET ADDRESS 3002 GOLFVIEW DRIVE
CITY-ST-ZIP VERO BEACH FL 32960

TITLE PD ☒ Change ☒ Addition
NAME NANCY WOOD
STREET ADDRESS 3007 Calcutta Drive
CITY-ST-ZIP Vero Beach, FL 32960

TITLE V ☒ Delete
NAME HELMAN, SUSAN
STREET ADDRESS 3000 PAR DRIVE
CITY-ST-ZIP VERO BEACH FL 32960

TITLE V ☒ Change ☒ Addition
NAME Kretsch, Karen
STREET ADDRESS 610 Golfview Drive
CITY-ST-ZIP Vero Beach, FL 32960

TITLE S ☒ Delete
NAME CONNELLY, BRIAN
STREET ADDRESS 3004 GOLFVIEW DRIVE
CITY-ST-ZIP VERO BEACH FL 32960

TITLE S ☒ Change ☐ Addition
NAME Simons, Celia
STREET ADDRESS 3055 Par Drive
CITY-ST-ZIP Vero Beach, FL 32960

TITLE T ☐ Delete
NAME RHODES, SOPHIE
STREET ADDRESS 3009 GOLFVIEW DRIVE
CITY-ST-ZIP VERO BEACH FL 32960

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

TITLE D ☒ Delete
NAME SKAGGS, PAUL
STREET ADDRESS 3009 NASSAU DRIVE
CITY-ST-ZIP VERO BEACH FL 32960

TITLE D ☒ Change ☐ Addition
NAME Connelly, Brian
STREET ADDRESS 3000 Par Drive
CITY-ST-ZIP Vero Beach, FL 32960

TITLE D ☒ Delete
NAME DEGAN, BONNIE
STREET ADDRESS 3015 NASSAU DRIVE
CITY-ST-ZIP VERO BEACH FL 32960

TITLE D ☒ Change ☐ Addition
NAME Hillman, Susan
STREET ADDRESS 3008 Golfview Dr.
CITY-ST-ZIP Vero Beach, FL 32960

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

Sophie Rhodes REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/12/2000

561-770-9621

CR2E037 (9/99)