

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 26, 2000 8:00 am
Secretary of State

04-26-2000 90085 016 ****61.25

DOCUMENT # 738257

1. Entity Name
VILLAGE OF CEDARWOOD ASSOCIATION, INC.

Principal Place of Business Mailing Address

C/O HAWK-EYE MANAGEMENT, INC.
 3901 NORTH FEDERAL HWY. SUITE 202
 BOCA RATON FL 33431

C/O HAWK-EYE MANAGEMENT, INC.
 3901 NORTH FEDERAL HWY. SUITE 202
 BOCA RATON FL 33431-4509

C0074423



DO NOT WRITE IN THIS SPACE

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 **59-2073187** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

PATTI, PAUL
3901 NORTH FEDERAL HIGHWAY, SUITE 202
BOCA RATON FL 33431

7. Name and Address of New Registered Agent

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 _____ (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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD STEMPEL, STEWART 7589 CEDARWOOD CIR BOCA RATON FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2VPD LANG, LILA 7628 CEDARWOOD CIRCLE BOCA RATON FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD WEISENTHAL, MYLES 7639 CEDARWOOD CIR BOCA RATON FL 33433	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GOLDBERG, PIERCE 7673 CEDARWOOD CIR BOCA RATON FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SCHWARTZ, IRWIN 7667 CEDARWOOD CIRCLE BOCA RATON FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TOBER, MERWIN 7612 CEDARWOOD CIRCLE BOCA RATON FL 33434	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD VPD WEISENTHAL, MYLES 7639 CEDARWOOD CIR BOCA RATON FL 33434	☒ 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		☐ 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: Stempel **RESERVED** 4/20/00 561-483-2493

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)