2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # 738257

1. Entity Name 👒

VILLAGE OF CEDARWOOD ASSOCIATION, INC.



FILED Apr 07, 2003 8:00 am Secretary of State

04-07-2003 90218 016 ****61.25

	•		WE TO	9				
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)		. Rigii rigi: gigi)	
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		☐ CHECK H	☐ CHECK HERE IF MAKING CHANGES			
City & State		City & State		4. FEI Number 59-2073187 Applied For Not Applicable				
Zip	Country	Zip	Zip Country		5. Certificate of Status Desired			
	6. Name and Address of Current (Registered Agent		7. Name and Address of N	lew Registered A	gent		
والمناف المناف ا		Name	Name					
PATTI, PAUL			Street Addre	Street Address (P.O. Box Number is Not Acceptable)				
	TH FEDERAL HIGHWAY, SUITE 20	2			<u> </u>			
BOCA RATON FL 33431				î				
	2 ter		City		FL	Zip Code	•	
8 The above of	amed entity submits this statement for	the nurness of changing its	registered office or regi	etered agent, or both, in the State		miliar with	and accord	
	ns of registered agent.	the purpose of changing its	registered office of regi	ateried agent, or both, in the otate	OFFICIOA. FAILE	ziriiliczi vyitti, a	and accept	
	, .			•				
SIGNATURE				The state of the s	,			
SI	gnature, typed or printed name of registered agent a	nd title if applicable. (NUTI	E: Registered Agent signature req	uired when reinstating)	DATE			
FILE NOW: FEE IS \$61.25			9. Election Campaign Financing Trust Fund Contribution.		Make Check lorida Departi	-		
10.	OFFICERS AND DIR	ECTORS	11.	ADDITIONS/CHANGES TO OF	FICERS AND DIR	ECTORS IN	10	
	D	☐ Delete	TITLE P	TEMPEL, STEW, 589 CEDARU	NRT	Change	☐ Addition	
	VIESENTHAL, MYLES		NAME S	CO CEDARU	DOOD CIR	cli		
	639 CEDARWOOD CIRCLE BOCA RATON FL 33434		STREET ADDRESS	PACA RATION A	7, 23	U.Z.U		
1 4	VPD		771.5	BOCA RATON, F 16SENTHAL, M 39 CEDARWO OCA BATUN, M	-h. 30	M Channe	Addition	
	STEMPEL, STEWART	☐ Delete	NAME 45	IESENTHAL P	11/252	Change	Audition	
	589 CEDARWOOD CIRCLE		STREET ADDRESS 76	39 CEDARWO	OD CIF	PCLE	1	
	BOCA RATON FL 33434		CITY-ST-ZIP	OCA BATUN. F	-4.339	134	}	
	D	Delete					Addition~ =	
	ang, lila	<i>/</i> /	NAME 4	PANIER, FRUING 27 CODARW	2016	2CLK		
 	628 CEDARWOOD CIRCLE		STREET ADDRESS	27 CODARCO		2476	4	
10	OCA RATON FL 33434		CITY-ST-ZIP	CA PATON, P				
TITLE 2	VPD	☐ Delete	. TITLE ! V	(P)	210	☐ Change	Addition	
NAME S			NAME 1-1	na han Al. E-LIG	<i>///</i>			
	PANIER, IRVING 627 CEDARWOOD CIRCLE		NAME /// STREET ADDRESS 7	ANDHAN, EDG	n CIRC	1. /=-	ľ	
STREET ADDRESS 7	627 CEDARWOOD CIRCLE 10CA RATON FL 33434		STREET ADDRESS 75	FRI CEDARWOO	DUKE	45	4	
STREET ADDRESS 7	627 CEDARWOOD CIRCLE	Delete	CITY-ST-ZIP	OCA BATUN	FL 3	<u> 343</u>	Addition	
STREET ADDRESS 76 CITY-ST-ZIP B TITLE S	627 CEDARWOOD CIRCLE IOCA RATON FL 33434	Delete	CITY-ST-ZIP TITLE NAME	TELLEDALWOOD OCA RATUN NDVPD APLAN, MAK	FL 3	343 Change	Addition	
STREET ADDRESS 76 CITY-ST-ZIP B TITLE S NAME STREET ADDRESS 76	627 CEDARWOOD CIRCLE OCA RATON FL 33434 D CHWARTZ, IRWIN 667 CEDARWOOD CIRCLE	CV Delete	CITY-ST-ZIP TITLE NAME STREET ADDRESS	TELLEDALWOOD OCA RATUN NDVPD APLAN, MAK	FL 3	343 Change	Addition	
STREET ADDRESS 76 CITY-ST-ZIP B TITLE S NAME STREET ADDRESS 76	627 CEDARWOOD CIRCLE IOCA RATON FL 33434 ID ICHWARTZ, IRWIN	□ V Delete	CITY-ST-ZIP TITLE NAME STREET ADDRESS	OCA BATUN	FL 3 FL 3 PUDOL	343 Change 234	Addition Addition	
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STREET ADDRESS 74 CITY-ST-ZIP B TITLE S NAME STREET ADDRESS 76 CITY-ST-ZIP B	627 CEDARWOOD CIRCLE OCA RATON FL 33434 D CHWARTZ, IRWIN 667 CEDARWOOD CIRCLE	,	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OCA RATUN NDVPD APLAN, MAR 2011 CLEDA	FL 3 FL 3 PUDOL	343 Change 234	Addition Addition	

12. Thereby 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

SIGNATUREX.

4-4-03 561-392-1600