

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 741773

1. Entity Name

GREEN LAKES CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

5995 BANNOCK TERRACE
BOYNTON BCH FL 33437

Mailing Address

5995 BANNOCK TERRACE
BOYNTON BCH FL 33437-1447

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

59-1916077

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

BARTLETT, JOE PRES
C/O CRYSTAL COMMUNITY MANAGEMENT, INC.
BOYNTON BCH. FL 33437

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 D ☐ Delete
NAME GOLUB, ELEANOR
STREET ADDRESS 11135 GREEN LAKE DRIVE
CITY-ST-ZIP BOYNTON BEACH FL

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

TITLE PD ☐ Delete
NAME LEVY, RALPH
STREET ADDRESS 11230 GREEN LAKE DR
CITY-ST-ZIP BOYNTON BEACH FL

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

TITLE D ☒ Delete
NAME ROTHEENBERG, ARTHUR
STREET ADDRESS 11296 GREEN LAKE DRIVE
CITY-ST-ZIP BOYNTON BEACH FL

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

TITLE D ☐ Delete
NAME MONACO, CARL
STREET ADDRESS 11234 GREEN LAKE DR.
CITY-ST-ZIP BOYNTON BEACH FL

TITLE D ☐ Change ☐ Addition
NAME GOLUB, ELEANOR
STREET ADDRESS 11135 GREEN LAKE DR
CITY-ST-ZIP BOYNTON BEACH, FL

TITLE SD ☐ Delete
NAME WOLF, BARBARA
STREET ADDRESS 11172 GREEN LAKE DR
CITY-ST-ZIP BOYNTON BCH. FL

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

TITLE TD ☐ Delete
NAME KOTZEN, MATHEWS
STREET ADDRESS 11090 GREEN LAKE DR
CITY-ST-ZIP BOYNTON BEACH FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Apr 10, 2000 8:00 am
Secretary of State

04-10-2000 90088 043 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/99)