

2000 UNIFORM BUSINESS REPORT (UBR)

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

05-26-2000 90103 008 ****61.25

A0066243

DO NOT WRITE IN THIS SPACE

DOCUMENT # **741867**
 1. Entity Name
Lakewood on the Green Villas Assoc.

Principal Place of Business Mailing Address

2. Principal Place of Business
3300 University Dr.
 Suite, Apt. #, etc.
#405
 City & State
Coral Springs, FL
 Zip Country
33065 USA

3. Mailing Address
3300 University Dr.
 Suite, Apt. #, etc.
#405
 City & State
Coral Springs, FL
 Zip Country
33065 USA

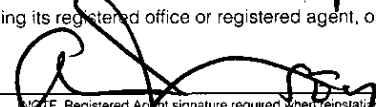
4. FEI Number
59-1809145
 Applied For
 Not Applicable

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
 Name
United Community Mgmt
 Street Address (P.O. Box Number is Not Acceptable)
3300 University Dr.
#405
 City State Zip Code
Coral Springs FL 33065

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 **UNITED COMMUNITY MGT. GM**  **4/27/00**
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so.
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

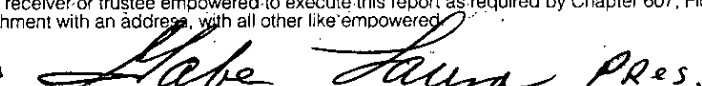
11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete
VPD	Price, Jerry	3108 Lakewood Circle	Margate, FL 33063	<input type="checkbox"/>
PD	Laura, Gabe	5380 Lakewood Circle	Margate, FL 33063	<input type="checkbox"/>
SB	Wilk, Barbara	5470 B Lakewood Circle	Margate, FL 33063	<input type="checkbox"/>
D	Bochicchio, Vincent	450E Lakewood Circle	Margate, FL 33063	<input type="checkbox"/>
D	Glazer, Marty	5182A Lakewood Circle	Margate, FL 33063	<input type="checkbox"/>
D	Hincapie, Martha	400 A Lakewood Circle	Margate, FL 33063	<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  Pres. **4/25/00** (954)973-9215
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Day/Year Phone #

CR2E034 (9/99)