

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 745574

1. Entity Name

WOODSCAPE TOWNHOMES CONDOMINIUM ASSOCIATION, INC

FILED

Apr 11, 2000 8:00 am
Secretary of State

04-11-2000 90022 005 ****61.25

Principal Place of Business

Mailing Address

3925 W WOODSCAPE DR
MIRAMAR FL 33023
US

3925 W. WOODSCAPE DR
MIRAMAR FL 33023-6627
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2043076

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

KAYE & ROGER PA
1500 W CYPRESS CREEK RD
STE 207
FT LAUDERDALE FL 33309

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
NAME
STREET ADDRESS
CITY-ST-ZIP

TD
RODGERS, VIVEEN
6996 WOODSCAPE CIR.
MIRAMAR FL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PD
BEREN, RALPH
3705 SW 69 AVE
MIRAMAR FL 33023

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SD
REISNER, TODD
4033 S.W. 69 WAY
MIRAMAR FL 33023

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SD

☒ 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

PD
PAULINE GREEN
6837 SW 36 COURT
MIRAMAR, FL 33023

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TD
FAITH HAUGHTON
7012 SW 40 STREET
MIRAMAR, FL 33023

☐ 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 *Pauline Green*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/5/00 (954) 987-1122
Date Daytime Phone #

CR2E037 (9/99)