2001 UNIFORM BUSINESS REPORT (UBR)

FILED May 14, 2001 8:00 am Secretary of State **DOCUMENT # 746631** 1. Entity Name BENT TREE VILLAS WEST CONDOMINIUM ASSOCIATION. I 05-14-2001 90232 007 ***150.00 Principal Place of Business Mailing Address 4470 APPLE TREE CIRCLE 4470 APPLE TREE CIRCLE **BOYNTON BEACH FL 33436 BOYNTON BEACH FL 33436** 00051245 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2040408 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name <u>Janet Strati</u> Street Address (P.O. Box Number is Not Acceptable) MANCUSO, ALPHONSE 4680 A Rosewood Tree Lane 9845A CLUSIA TR. **BOYNTON BEACH FL 33436** Zip Code 33436 FL Boynton Beach 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. 4/30/01 Janet Strati. Treasurer SIGNATURE re, typed or printed name of registered agent and title if applicable. Make Check Payable to FILE NOW: 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. ☐ Addition PD Tr Change TITLE Delete TITLE PD POLITO, EMIL NAME NAME Michael Forte STREET ADDRESS 4480 B NUTMEG TREE LANE STREET ADDRESS 9845B Bischofia Tree Boynton Beach, FL 33436 CITY-ST-ZIP **BOYNTON BEACH FL 33436** CITY-ST-7IP **VPD** Change Addition TITLE Delete TITLE VPD Rocco Marchesani FORTE, MICHAEL NAME NAME 9970A Cherry Tree STREET ADDRESS STREET ADDRESS 9845-B BISCHOFIA TR. Boynton Beach, FL 33436 CITY-ST-ZIP CITY-ST-ZIP **BOYNTON BEACH FL 33436** SD TITLE Change ☐ Addition TITLE ☐ Delete GRONERT, ELAINE NAME NAME STREET ADDRESS STREET ADDRESS 4620 A MAHOE TREE LANE CITY-ST-ZIP CITY-ST-ZIP **BOYNTON BEACH FL 33436** ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME STRATI, JANET NAME STREET ADDRESS 4680 A ROSEWOOD TREE LANE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOYNTON BEACH FL 33436** TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

SICHATURE REQUEREDStrati 4/30/01 561-736-0455 SIGNATURE Daytime Phone #

changed, or on an attachment with an address, with all other like empowered