

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 29, 2002 8:00 am**  
**Secretary of State**

03-29-2002 91431 017 \*\*\*\*61.25

0019566

**DOCUMENT # 748741**

1. Entity Name

**POMPAÑO COURTS CONDOMINIUM ASSOCIATION, INC.**

Principal Place of Business

Mailing Address

520 SW 15TH STREET  
 POMPAÑO BEACH FL 33060  
 US

9365 W SAMPLE RD  
 STE 203  
 CORAL SPRINGS FL 33065  
 US

2. Principal Place of Business

9365 W. SAMPLE ROAD

3. Mailing Address

Suite, Apt. #, etc.

Suite 203

City & State

CORAL SPRINGS, FL

City & State

Zip

33065

Country

US

Zip

Country

4. FEI Number

59-2067189

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

SAATHOFF, RONALD  
 CONDO MANAGEMENT ALTERNATIVE  
 9365 W SAMPLE RD #203  
 CORAL SPRINGS FL 33065

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 **VD** ☒ Delete  
 NAME **MEEK, THOMAS**  
 STREET ADDRESS **9365 WEST SAMPLE ROAD**  
 CITY-ST-ZIP **CORAL SPRINGS FL**

TITLE **PD** ☐ Change ☒ Addition  
 NAME **BROWN, LAYRA**  
 STREET ADDRESS **9365 W. SAMPLE ROAD #203**  
 CITY-ST-ZIP **CORAL SPRINGS, FL 33065**

TITLE **STD** ☒ Delete  
 NAME **BOYCE, JOHN**  
 STREET ADDRESS **9365 WEST SAMPLE ROAD**  
 CITY-ST-ZIP **CORAL SPRINGS FL**

TITLE **VD** ☐ Change ☒ Addition  
 NAME **BELDEN, VALERIE**  
 STREET ADDRESS **9365 W. SAMPLE ROAD #203**  
 CITY-ST-ZIP **CORAL SPRINGS, FL 33065**

TITLE **PD** ☒ Delete  
 NAME **BRUMLEY, DEAN**  
 STREET ADDRESS **9365 WEST SAMPLE ROAD**  
 CITY-ST-ZIP **CORAL SPRINGS FL**

TITLE **STD** ☐ Change ☒ Addition  
 NAME **BOYCE, JOHN**  
 STREET ADDRESS **9365 W. SAMPLE ROAD #203**  
 CITY-ST-ZIP **CORAL SPRINGS, FL 33065**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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 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:

*John Boyce*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

954-752-4796  
 Daytime Phone #

CR2E037 (9/01)