## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED DOCUMENT # 751734 Mar 03, 2000 8:00 am 1. Entity Name Secretary of State THE TOWNSHIP COMMUNITY MASTER ASSOCIATION, INC. 03-03-2000 90020 049 \*\*\*\*61.25 Principal Place of Business Mailing Address 2424 LYONS RD. 2424 LYONS RD. COCONUT CREEK FL 33063-3822 COCONUT CREEK FL 33063-0899 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 59-2049839 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) MARTIN, ROBERT C ESQ. 319 S.E. 14TH STREET FORT LAUDERDALE FL 33316-1929 Zip Code City FL 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 DATE of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be Make Check Payable to FILE NOW: 9. Election Campaign Financing Trust Fund Contribution. **Department of State** Added to Fees FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. PD Delete TITLE Addition TITLE NAME LEMELBAUM, LARRY NAME STREET ADDRESS STREET ADDRESS 2424 LYONS RD CITY-ST-ZIP CITY-ST-ZIE COCONUT CREEK FL ☐ Change Addition Delete TITLE TITLE SONSKY, SONNY NAME NAME STREET ADDRESS STREET ADDRESS 2424 LYONS RD CITY-ST-ZIP CITY-ST-ZIE COCONUT CREEK FL ☐ Addition ☐ Delete TITLE Change TITLE TD NAME NAME FRANK, LEONARD STREET ADDRESS STREET ADDRESS 2424 LYONS RD. CITY-ST-ZIP CITY-ST-ZIF COCONUT CREEK FL VICE PRESIDENT. **Change** Addition ☐ Delete TITLE TITLE NAME NAME ABRAMSKY, NORMAN MBRAMSKY, NORMAN STREET ADDRESS STREET ADDRESS 24 Lyons Road 2424 LYONS ROAD CITY-ST-ZIF CITY-ST-ZIP **COCONUT CREEK FL** DIRECTUR 🗶 Change Addition Delete TITLE BUND, HELEN QUAY LYONS ROAD KRIEG, SHELLY NAME STREET ADDRESS STREET ADDRESS 2424 LYONS ROAD CITY OF ZIP CITY-ST-ZIP OCONVICREKK FL COCONUT CREEK FL ☐ Change Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS 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

SIGNATURE:

CITY-ST-ZIP

changed, or on an attachment

Daytime Phone #