

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 752860

1. Entity Name

DELRAY VILLAS PLAT 3 HOMEOWNERS' ASSOCIATION, IN

FILED
Feb 22, 2000 8:00 am
Secretary of State

02-22-2000 90005 016 ****61.25

Principal Place of Business

Mailing Address

ON, INC.
5841 CONNIE BLVD.
DELRAY BEACH FL 33484

ON, INC.
5841 CONNIE BLVD.
DELRAY BEACH FL 33484-8536

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2311367

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

~~ST. JOHN, DAVID
500 AUSTRALIAN AVENUE S.
SUITE 800
WEST PALM BEACH FL 33401~~

Name **JOSHUA G. GERSTEIN**
Street Address (P.O. Box Number is Not Acceptable)
1515 N. FEDERAL HWY. SUITE 300
BOCA RATON
City **FLA** FL Zip Code **33432**

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	T	☐ Delete
NAME	PORTNOY, RUTH E	
STREET ADDRESS	14757 EDNA WAY	
CITY-ST-ZIP	DELRAY BCH FL 33484	
TITLE	D	☒ Delete
NAME	SMITH, FRANK	
STREET ADDRESS	5811 WANDA LANE	
CITY-ST-ZIP	DELRAY BEACH FL	
TITLE	VPD	☒ Delete
NAME	SULZER, JERALD	
STREET ADDRESS	14616 LUCY DR	
CITY-ST-ZIP	DELRAY BCH FL	
TITLE	D	☐ Delete
NAME	GURNEY, HAROLD	
STREET ADDRESS	5814 DORIS COURT	
CITY-ST-ZIP	DELRAY BEACH FL	
TITLE	D	☐ Delete
NAME	COHEN, ROSLYN	
STREET ADDRESS	14585 LUCY DR	
CITY-ST-ZIP	DELRAY BEACH FL	
TITLE	P	☐ Delete
NAME	ABELSKY, GEORGE	
STREET ADDRESS	14589 LUCY DR	
CITY-ST-ZIP	DELRAY BEACH FL	

TITLE	VP	☐ Change ☒ Addition
NAME	LEE BENDER	
STREET ADDRESS	14606 LUCY DR	
CITY-ST-ZIP	DELRAY BEACH FL 33484	
TITLE	D	☐ Change ☒ Addition
NAME	FRANCES BASSELL	
STREET ADDRESS	5796 WANDA LA	
CITY-ST-ZIP	DELRAY BEACH FL 33484	
TITLE	D	☐ Change ☒ Addition
NAME	BERNARD SANDOWSKY	
STREET ADDRESS	14530 CANDY WAY	
CITY-ST-ZIP	DELRAY BEACH FL 33484	
TITLE	D	☐ Change ☒ Addition
NAME	MEYER POSNER	
STREET ADDRESS	14566 LUCY DR	
CITY-ST-ZIP	DELRAY BEACH FL 33484	
TITLE	D	☐ Change ☒ Addition
NAME	ART BOUZIANIS	
STREET ADDRESS	5799 WANDA LA	
CITY-ST-ZIP	DELRAY BEACH FL	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

I 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 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 on or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)