

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 25, 2001 8:00 am
Secretary of State

01-25-2001 90253 019 ****61.25

DOCUMENT # 752860

1. Entity Name

DELRAY VILLAS PLAT 3 HOMEOWNERS' ASSOCIATION, IN

Principal Place of Business

Mailing Address

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

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

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2311367

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

**GERSTEIN, JOSHUA G
 1515 N FEDERAL HWY
 SUITE 300
 BOCA RATON FL 33432**

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	T PORTNOY, RUTH E 14757 EDNA WAY DELRAY BCH FL 33484	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BONDER, LEE 14606 LUCY DR DELRAY BEACH FL 33484	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BASSELL, FRANCES 5796 WANDA LN DELRAY BEACH FL 33484	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GURNEY, HAROLD 5814 DORIS COURT DELRAY BEACH FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COHEN, ROSLYN 14585 LUCY DR DELRAY BEACH FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ABELSKY, GEORGE 14589 LUCY DR DELRAY BEACH FL	☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D POSNER MEYER 14586 LUCY DR DELRAY BCH, FL 33484	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SANDOWSKY, BERNARD 14530 CANARY WAY DELRAY BCH, FL 33484	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOUZIANAS 5799 WANDA WAY DELRAY BCH, FL 33484	☐ 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		☐ 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:

Richard E. Portnoy
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/11/01

(561) 496-4290

Date

Daytime Phone #

CR2E037 (10/00)