FILED

## 2001 UNIFORM BUSINESS REPORT (UBR)

## Mar 12, 2001 8:00 am **DOCUMENT # 753015 Secretary of State** 1. Entity Name 03-12-2001 90419 004 \*\*\*\*61.25 ARBORWOOD HOMEOWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address 21928 SATINWOOD DR 21928 SATINWOOD DR **BOCA RATON FL 33428 BOCA RATON FL 33428** 2. Principal Place of Business 21857 High PINE IRAI Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2044489 RATON Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent~ Name Street Address (P.O. Box Number is Not Acceptable) THOMAS, FAYE 21928 SATINWOOD DR **BOCA RATON FL 33428** 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) 9. Election Campaign Financing FILE NOW: Make Check Payable to \$5.00 May Be Trust Fund Contribution. Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS TITLE **▼** Delete TITLE Change CHRISTOPHER, FARNHAM MCDONALD, MICHAEL NAME NAME 21821 High Pine TRAIL BOCA RATON, FL 334 STREET ADDRESS 21838 HIGH PINE TR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33428** Delete ☐ Addition TITLE SD TITLE Change NAME NAME THOMAS, FAYE STREET ADDRESS STREET ADDRESS 21928 SATINWOOD DR CITY-ST-ZIP CITY-ST-ZIP BOCA RATON FL 33428 TITLE ☐ Delete TITLE Change Addition **UELTZEN. BEVERLY** NAME STREET ADDRESS STREET ADDRESS 21857 HIGH PINE TRAIL CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL** Addition ☐ Delete ☐ Change TITLE TITLE VAN GULICK, RICHARD STREET ADDRESS STREET ADDRESS 21964 HOLLY TREE WAY CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33428** ☐ Delete ☐ Addition CANNAVA, GARY NAME STREET ADDRESS 21947 HOLLY TREE WY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33428** ☐ Delete TITLE ☐ Addition TITLE 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

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