

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 03, 2003 8:00 am
Secretary of State

03-03-2003 90948 029 ****61.25

DOCUMENT # 753015

1. Entity Name

ARBORWOOD HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

**21928 SATINWOOD DR
BOCA RATON FL 33428
US**

Mailing Address

**21857 HIGH PINE TRAIL
BOCA RATON FL 33428
US**

2. Principal Place of Business

21821 HIGH PINE TRAIL

Suite, Apt. #, etc.

3. Mailing Address

9077 OLD PINE ROAD

Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State

BOCA RATON FL

City & State

BOCA RATON FL

4. FEI Number **59-2044489**

Applied For

Not Applicable

Zip

33428

Country

USA

Zip

33428

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**THOMAS, FAYE
21928 SATINWOOD DR
BOCA RATON FL 33428**

7. Name and Address of New Registered Agent

Name **BEVERLY FARNHAM**

Street Address (P.O. Box Number is Not Acceptable)

21821 HIGH PINE TRAIL

City

BOCA RATON

FL

Zip Code

33428

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

BEVERLY FARNHAM, SEC. 2/25/03

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **HILINSKI, RICHARD**
STREET ADDRESS **21748 HIGH PINE TRAIL**
CITY-ST-ZIP **BOCA RATON FL 33428**

TITLE **SD** ☐ Delete
NAME **THOMAS, FAYE**
STREET ADDRESS **21928 SATINWOOD DR**
CITY-ST-ZIP **BOCA RATON FL 33428**

TITLE **TD** ☒ Delete
NAME **UELTZEN, BEVERLY**
STREET ADDRESS **21857 HIGH PINE TRAIL**
CITY-ST-ZIP **BOCA RATON FL**

TITLE **VD** ☒ Delete
NAME **LEATHERS, JERRELL**
STREET ADDRESS **21920 HOLLY TREE WAY**
CITY-ST-ZIP **BOCA RATON FL 33428**

TITLE **VD** ☐ Delete
NAME **CANNAVA, GARY**
STREET ADDRESS **21947 HOLLY TREE WY**
CITY-ST-ZIP **BOCA RATON FL 33428**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VD** ☒ Change ☐ Addition
NAME **THOMAS, FAYE**
STREET ADDRESS **21928 SATINWOOD DRIVE**
CITY-ST-ZIP **BOCA RATON, FL 33428**

TITLE **TD** ☐ Change ☒ Addition
NAME **KERR, JOANNE F.**
STREET ADDRESS **9077 OLD PINE ROAD**
CITY-ST-ZIP **BOCA RATON, FL 33428**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **SD** ☐ Change ☒ Addition
NAME **FARNHAM, BEVERLY**
STREET ADDRESS **21821 HIGH PINE TRAIL**
CITY-ST-ZIP **BOCA RATON, FL 33428**

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:

SIGNATURE REQUIRED

2/25/03

561-558-1104

CR2E037 (10/02)