

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 03, 2001 8:00 am
Secretary of State

04-03-2001 90004 048 ****70.00

0051143

DOCUMENT # 753030

1. Entity Name

VILLAS OF BURWICK AND THURSTON HOMEOWNERS ASSOCI

Principal Place of Business

Mailing Address

**300 AVENUE OF CHAMPIONS
PALM BEACH GARDENS FL 33418
US**

**300 AVNUE OF CHAMPIONS
PALM BEACH GARDENS FL 33418
US**

818952



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2063593

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

**QUEEN, SUSAN M.
300 AVENUE OF CHAMPIONS
PALM BEACH GARDENS FL 33418**

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 **P** ☐ Delete
NAME **WHITE, JOSEPH**
STREET ADDRESS **300 AVENUE OF CHAMPIONS**
CITY-ST-ZIP **PALM BEACH GARDENS FL**

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

TITLE **VD** ☒ Delete
NAME **BRADLIEB, BEVAN**
STREET ADDRESS **300 AVENUE OF CHAMPIONS**
CITY-ST-ZIP **PALM BEACH FL**

TITLE **VP** ☐ Change ☒ Addition
NAME **James Wesson**
STREET ADDRESS **300 Avenue of the Champions**
CITY-ST-ZIP **Palm Beach Gardens FL 33418**

TITLE **D** ☐ Delete
NAME **NELOISE, BILL**
STREET ADDRESS **300 AVENUE OF CHAMPIONS**
CITY-ST-ZIP **PLM BCH GARDENS FL**

TITLE **STB** ☒ Change ☐ Addition
NAME **Neloise Bell**
STREET ADDRESS **300 Avenue of the Champions**
CITY-ST-ZIP **Palm Beach Gardens FL 33418**

TITLE **D** ☒ Delete
NAME **STEPHEN, SEEFRIED**
STREET ADDRESS **300 AVENUE OF CHAMPIONS**
CITY-ST-ZIP **PALM BCH GDN FL**

TITLE **D** ☐ Change ☒ Addition
NAME **Phyllis Cornelio**
STREET ADDRESS **300 Avenue of the Champions**
CITY-ST-ZIP **Palm Beach Gardens FL 33418**

TITLE **T** ☒ Delete
NAME **WESSON, JIM**
STREET ADDRESS **300 AVENUE OF CHAMPIONS**
CITY-ST-ZIP **PALM BEACH GARDENS FL 33418**

TITLE **D** ☐ Change ☒ Addition
NAME **James K. Lee**
STREET ADDRESS **300 Avenue of the Champions**
CITY-ST-ZIP **Palm Beach Gardens FL 33418**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE: SEEFRIED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

14 March 2001 561(776-5870)

Date

Daytime Phone #

CR2E037 (10/00)