

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 755178

1. Entity Name

THE POINTE HOMEOWNER'S ASSOCIATION, INC.

FILED
Apr 06, 2001 8:00 am
Secretary of State

04-06-2001 90008 019 *****61.25

Principal Place of Business

3204 NE 16TH ST.
POMPANO BEACH FL 33062

Mailing Address

9365 W. SAMPLE ROAD
SUITE 203-A
CORAL SPRINGS FL 33065
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0560540

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

SAATHOFF, NANCY
CONDO MGMT. ALTERNATIVE, INC
9365 W. SAMPLE RD #203A
CORAL SPRINGS FL 33065

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 PD
NAME KOVALESKI, KEN ☒ Delete
STREET ADDRESS 3204 NE 16TH ST, #6
CITY-ST-ZIP POMPANO BCH. FL

TITLE PD
NAME SANTIPADRI, MIKE ☐ Change ☒ Addition
STREET ADDRESS 9365 W. SAMPLE ROAD
CITY-ST-ZIP CORAL SPRINGS, FL

TITLE SD
NAME MAZER, DIANE ☒ Delete
STREET ADDRESS 3204 NE 16TH ST
CITY-ST-ZIP POMPANO BEACH FL

TITLE SD
NAME MAZER, DIANE ☐ Change ☒ Addition
STREET ADDRESS 9365 W. SAMPLE ROAD
CITY-ST-ZIP CORAL SPRINGS, FL

TITLE TD
NAME CANTWELL, ELIZABETH ☒ Delete
STREET ADDRESS 3204 NE 16TH ST
CITY-ST-ZIP POMPANO BEACH FL

TITLE TD
NAME CANTWELL, ELIZABETH ☐ Change ☒ Addition
STREET ADDRESS 9365 W. SAMPLE ROAD
CITY-ST-ZIP CORAL SPRINGS, FL

TITLE VPD
NAME SANTIPADRI, MIKE ☒ Delete
STREET ADDRESS 3204 NE 16TH ST
CITY-ST-ZIP POMPANO BEACH FL

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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:

Michael Santipadri
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/3/2001
Date

954-752-4796
Daytime Phone #

CR2E037 (10/00)