

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

**FILED**  
**Jan 24, 2003 8:00 am**  
**Secretary of State**

01-24-2003 90054 006 \*\*\*\*61.25

**DOCUMENT # 756153**

1. Entity Name  
**LAKE POINTE OWNERS' ASSOCIATION, INC.**



Principal Place of Business

C/O D.C.I., INC.  
2035 HARDING ST. #200  
HOLLYWOOD FL 33020  
US

Mailing Address

C/O D.C.I., INC.  
2035 HARDING ST. #200  
HOLLYWOOD FL 33020  
US

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 **59-2091973**

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

**DEVELOPMENT CONSULTANTS, INC.**  
**2035 HARDING ST**  
**#200**  
**HOLLYWOOD FL 33020**

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. 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

**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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	VPD	<input type="checkbox"/> Delete
NAME	BROCK, DAVID	
STREET ADDRESS	218 LAKE POINTE DR. #208	
CITY-ST-ZIP	OAKLAND PARK FL	
TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	HAAG, BOB	
STREET ADDRESS	212 LAKE POINTE DR. #305	
CITY-ST-ZIP	OAKLAND PK. FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	KING, PENNY	
STREET ADDRESS	212 LAKE POINTE DR #101	
CITY-ST-ZIP	OAKLAND PARK FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	HURWITZ, DAVID	
STREET ADDRESS	10563 BUTTOWOOD LAKE DR	
CITY-ST-ZIP	BOCA RATON FL 33498	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	FARRELL, OLGA	
STREET ADDRESS	216 LAKE POINTE DRIVE, #120	
CITY-ST-ZIP	OAKLAND PARK FL 33309	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	DIAZ, EDUARDO	
STREET ADDRESS	205 LAKE POINTE DRIVE, #101	
CITY-ST-ZIP	OAKLAND PARK FL 33309	

TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Brock, David	
STREET ADDRESS	218 Lake Pointe Drive, #208	
CITY-ST-ZIP	Oakland Park, FL 33309	
TITLE	VPD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Brennen-James, Cindy	
STREET ADDRESS	202 Lake Pointe Drive #203	
CITY-ST-ZIP	Oakland Park, FL 33309	
TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	King, Penny	
STREET ADDRESS	216 Lake Pointe Drive #101	
CITY-ST-ZIP	Oakland Park, FL 33309	
TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Mirchev, Rod	
STREET ADDRESS	206 Lake Pointe Drive #207	
CITY-ST-ZIP	Oakland Park, FL 33309	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Thurberg, Steve	
STREET ADDRESS	206 Lake Pointe Drive #207	
CITY-ST-ZIP	Oakland Park, FL 33309	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Bernardi, John	
STREET ADDRESS	201 Lake Pointe Drive @104	
CITY-ST-ZIP	Oakland Park, FL 33309	

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: *X SIGNATURE*

1-17-03

CR2E037 (10/02)

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0016789

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PAGE TWO OF TWO

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US

Mailing Address  
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2035 HARDING ST. #200  
HOLLYWOOD FL 33020  
US

20018045



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-2091973

Applied For

Not Applicable

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(NOTE: Registered Agent signature required when reinstating)

DATE

D  
Volz, Philip  
208 Lake Pointe Drive #203  
Oakland Park, FL 33309

Addition

D  
Rahmey, Rich  
208 Lake Pointe Drive #108  
Oakland Park, FL 33309

Addition

CITY-ST-ZIP | OAKLAND PARK FL 33309

CITY-ST-ZIP

Oakland Park, FL 33309

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SIGNATURE

SIGNATURE REQUIRED