

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 07, 2000 8:00 am
Secretary of State

02-07-2000 90002 003 ****61.25

DOCUMENT # 759800
 1. Entity Name
WELLESLEY PARK IMPROVEMENT ASSOCIATION, INC.

Principal Place of Business C/O QUALITY MGT & SERVICES 1761 W. HILLSBOROUGH BLVD. STE 326 DEERFIELD BEACH FL 33442 US	Mailing Address C/O QUALITY MGT & SERVICES 1761 W. HILLSBOROUGH BLVD. STE 326 DEERFIELD BEACH FL 33442-1562 US
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2180628	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent FRIDERICKO O. POKRAJAC QUALITY MGT & SERVICES 1761 W. HILLSBOROUGH BLVD, STE 326 DEERFIELD BEACH FL 33442	7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City FL Zip Code _____
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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE: P NAME: ARMA, IRENE STREET ADDRESS: 5951 WELLESLEY PARK DR CITY-ST-ZIP: BOCA RATON FL 33433	<input type="checkbox"/> Delete	TITLE: P NAME: Vigil, Rodolfo STREET ADDRESS: 5951 Wellesely Park Dr. 208 CITY-ST-ZIP: Boca Raton, FL 33433	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: VP NAME: RODOLFO, VIGIL STREET ADDRESS: 5951 WELLESLEY PARK DRIVE CITY-ST-ZIP: BOCA RATON FL 33433	<input type="checkbox"/> Delete	TITLE: VP NAME: Spofford, David STREET ADDRESS: 5951 Wellesely Park Dr. 406 CITY-ST-ZIP: Boca Raton, FL 33433	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: TD NAME: SPOFFORD, DAVID STREET ADDRESS: 5951 WELLESLEY PARK DRIVE CITY-ST-ZIP: BOCA RATON FL 33433	<input type="checkbox"/> Delete	TITLE: T NAME: Arma, Irene STREET ADDRESS: 5951 Wellesley Park Dr. 706 CITY-ST-ZIP: Boca Raton, FL 33433	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: SD NAME: HOERTZ, JOANNE STREET ADDRESS: 5951 WELLESLEY PARK DR CITY-ST-ZIP: BOCA RATON FL 33433	<input type="checkbox"/> Delete	TITLE: S NAME: Williams, Nancy STREET ADDRESS: 5951 Wellesely Park Dr. 407 CITY-ST-ZIP: Boca Raton, FL 33433	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: D NAME: REINSTATLER, MARIE STREET ADDRESS: 5951 WELLESLEY PARK DRIVE CITY-ST-ZIP: BOCA RATON FL 33433	<input type="checkbox"/> Delete	TITLE: D NAME: Thau, Albert STREET ADDRESS: 5951 Wellesely Park Dr. 701 CITY-ST-ZIP: Boca Raton, FL 33433	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: D NAME: GIORGIO, BRUSCARINO STREET ADDRESS: 5951 WELLESLEY PARK DRIVE CITY-ST-ZIP: BOCA RATON FL 33433	<input type="checkbox"/> Delete	TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Rodolfo Vigil, President Date: 1/15/00 Daytime Phone #: 561 750 4384