

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00287

1. Entity Name

DEER POINTE HOMEOWNERS' ASSOCIATION, INC.

FILED
Feb 16, 2000 8:00 am
Secretary of State

02-16-2000 90028 007 ****61.25

Principal Place of Business

Mailing Address

2801 N MILITARY TRAIL
BOCA RATON FL 33431
US

2801 N MILITARY TRAIL
BOCA RATON FL 33431-6316
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

59-2512970

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

HAAG, DAVID
2801 N MILITARY TRAIL
BOCA RATON FL 33431

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	☐ Delete
NAME	MCCLUNG, KERWIN	
STREET ADDRESS	385 N.W. 36TH AVENUE	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	
TITLE	VPD	☒ Delete
NAME	NOTTKE, LINDA	
STREET ADDRESS	223 N.W. 36TH AVENUE	
CITY-ST-ZIP	DEERFIELD BCH. FL 33442	
TITLE	SD	☒ Delete
NAME	HUTCHINSON, WARNER	
STREET ADDRESS	239 N.W. 36TH AVENUE	
CITY-ST-ZIP	DEERFIELD BCH. FL 33442	
TITLE	TD	☐ Delete
NAME	TODD, MARK	
STREET ADDRESS	361 N.W. 36TH AVENUE	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	
TITLE	D	☒ Delete
NAME	WISE, STEVE	
STREET ADDRESS	449 N.W. 36TH AVENUE	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	☐ Change ☒ Addition
NAME	ROTH, ART	
STREET ADDRESS	353 NW 36TH AVE	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	
TITLE	D	☐ Change ☒ Addition
NAME	BARRIOS, JOSE	
STREET ADDRESS	469 NW 36TH AVE	
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☒ Addition
NAME	KURCIVIEZ, PATRICIA	
STREET ADDRESS	3675 NW 6TH ST.	
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442	
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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/25/10

561-241-0285

Date

Daytime Phone #

CR2E037 (9/99)