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

## FILED May 27, 2002 8:00 am Secretary of State

DOCUMENT #  1. Entity Name					Secretary of State 05-27-2002 90443 014 ****61.25		
The Villas of Coral	Ridge Homeown Associa			'n.			
document number: NO1							
DO NOT WRITE IN THIS SPACE							
2. Principal Place of Business	3. Mailing Address						
1304 N.E. 26th Ave.	T	1304 N.E. 26th Ave.				- *** 	
Suite, Apt. #, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & State	City & State				4. FEI Number Applied For		
Fort Lauderdale Fort Lauderdale							X Not Applicable
Zip Country USA	<sup>Zip</sup> 33304	Country USA			5. Certificate of Status Desired \$8.75 Additional Fee Required		
					7. Name and Addre	ss of Current Registered A	' '
DO NOT WRITE					rl Bork		
			Street A	Address (P.O. Box Number is Not Acceptable) 1304 N.E. 26th. Avenue			
IN THIS SF	PACE			1001	11.11. 2001	a. Avenue	
			City Fort Lauderdale FL Zip Code 33304				
8. The above named entity submits this statement for	or the purpose of changing its	registe	d office o	r regist <b>e</b> re	ed agent, or both, in t	he state of Florida.	
Karl Bork, Treas	wron A	\ \				Mars 10 200	,
SIGNATURE Signature, typed or printed name of registered agent		الملا	K		when reinstating)	May 18,200	
organistic syptem of prince frame of regulated agent	and the mappicable. (NOTE	negisiere	o Agent signar	ure required	when reinstating)	DATE	
FEE IS \$61.25 Initial or Amended UBR  9. Election Campaign Trust Fund Contribu					\$5.00 May Be Added to Fees Make Check Payable to Department of State		
10. OFFICERS AND DIF	RECTORS						
Mr. Edward Bianchi P/D 1036 N. E. 26th. Avenue STREET ADDRESS CITY-ST-ZIP Fort Lauderdale, FL 33304							E037B (12/01)
Ms. Nancy McCarty V/D			:				1~
NAME 1308 N.E. 26th. Avenue			E	-			,  S
CITY-ST-ZIP Fort Lauderdale, FL 33304			ET ADORESS - ST-ZIP		•	9	
Mr. Karl Bork S/T/D  NAME 1304 N.E. 26th. Avenue						- 2	
STREET ADDRESS. 1304 N.E. 20th. Avenue			STREET ADDRESS		DO NOT WRITE		
TITLE		TITLE		··			
NAME STREET ADDRESS DITY-ST-ZIP			NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE		
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TREET ADDRESS   ITY-ST-ZIP			T ADDRESS				
2. Thereby certify that the information supplied with	this filing does not qualify for t	4	ST-ZIP	ad in Soat	ion 110 07/2V(). Flat	de Chat, to a 1.5 mb and a 1.5 mb	

2. 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 signally 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 fequilited by Chapter 617, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

**SIGNATURE:** 

Karl Bork S/T/D

May 18,2002 954-564-