

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

FILED
Apr 10, 2003 8:00 am
Secretary of State

04-10-2003 90075 043 ****61.25

DOCUMENT # N08153

1. Entity Name

WIMBLEDON VILLAS AT TOWN PLACE, INC.



Principal Place of Business

3000 WOODLAKE BLVD.
STE 201
LAKE WORTH FL 33409
US
*Phoenix Mgm.
Wimbledon Villas
P.O. Box 272474
Boca Raton, FL 33427*

Mailing Address

3000 WOODLAKE BLVD.
STE 201
LAKE WORTH FL 33409
US
*Wimbledon Villas
@ Town Place Inc.
P.O. Box 272474
Boca Raton,
FL 33427-2474*

2. Principal Place of Business

Wimbledon Villas

3. Mailing Address

Wimbledon Villas

Suite, Apt. #, etc.

40 Phoenix Management

Suite, Apt. #, etc.

P.O. Box 272474

City & State

3082 Jog Road

City & State

Boca Raton, FL

Zip

33411

Country

Palm Beach

Zip

33411

Country

Palm Beach



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-2561580**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BECKER & POLIAKOFF, P.A.
ATTN: PETER C. MOLLENGARDEN, ESQ.
500 AUSTRALIAN AVE. SOUTH, 9TH FLOOR
W. PALM BEACH FL 33401

7. Name and Address of New Registered Agent

Name
Becker & Poliakoff, P.A.

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

TITLE	PD	☐ Delete
NAME	HELFENBEIN, BARRY	
STREET ADDRESS	21704 WAPFORD WAY	
CITY-ST-ZIP	BOCA RATON FL 33486	
TITLE	VPBT	☐ Delete
NAME	STERNBERG, ANDREW	
STREET ADDRESS	21696 CROMWELL CIRCLE	
CITY-ST-ZIP	BOCA RATON FL 33486	
TITLE	VPD	☐ Delete
NAME	STAN, ELEANOR	
STREET ADDRESS	5496 FOX HOLLOW DRIVE	
CITY-ST-ZIP	BOCA RATON FL 33486	
TITLE	SD	☐ Delete
NAME	TEMERSON, NOREEN	
STREET ADDRESS	21696 WARFORD WAY	
CITY-ST-ZIP	BOCA RATON FL 33486	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	V/D	☒ Change ☐ Addition
NAME		
STREET ADDRESS	23200 Camino Del Mar #307	
CITY-ST-ZIP	Boca Raton, FL 33433	
TITLE	T/D	☒ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	V/D	☒ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	P/D	☐ Change ☒ Addition
NAME	Locus, Hank	
STREET ADDRESS	5500 FOX HOLLOW DR.	
CITY-ST-ZIP	Boca Raton, FL 33486	
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] **3/30/03**

CR2E037 (10/02)