

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

FILED
Feb 25, 2002 8:00 am
Secretary of State

02-25-2002 90035 026 ****61.25

DOCUMENT # N09175

1. Entity Name

TAMARIND VILLAGE HOMEOWNERS ASSOCIATION, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

c/o Castle Management, Inc.

3. Mailing Address

c/o Castle Management, Inc.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

P.O. Box 189013

P.O. Box 189013

City & State

City & State

Plantation, FL

Plantation, FL

Zip

Country

Zip

Country

33318

33318

4. FEI Number

59-2470145

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Walter Johnston

Street Address (P.O. Box Number is Not Acceptable)

2650 Aloe Avenue

City

Coconut Creek

FL

Zip Code

33063

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

FEE IS \$61.25
Initial or Amended UBR

9. Election Campaign Financing
Trust Fund Contribution. ☐

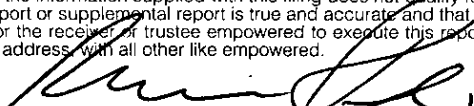
\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Randazzo, Rochelle 2630 Aloe Ave. Coconut Creek, FL 33063	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Lowe, Carolyn 2535 Dagoon Avenue Coconut Creek, FL 33063	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Johnston, Walter 2650 Aloe Avenue Coconut Creek, FL 33063	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Pitterman, Lenny 2469 Dawn Tree Terrace Coconut Creek, FL 33063	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Erlich, Jack 2530 Calamondin Circle Coconut Creek, FL 33063	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Stitch, Irwin 2661 Blue Sage Avenue Coconut Creek, FL 33066	TITLE 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 on an attachment with an address with all other like empowered.

SIGNATURE:  Rochelle Randazzo, President 1/21/02 954-792-6000

CR2E037B (12/01)