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Aug 14 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N09282 (7)

1. Corporation Name

VILLAGE OF HORSESHOE ACRES, INC.

Principal Place of Business

Mailing Address

2901 CLINT MOORE RD., STE #424
BOCA RATON FL 33496
US

2901 CLINT MOORE RD. STE #424
BOCA RATON FL 33496-2041
US



3. Date Incorporated or Qualified
05/14/1985

3a. Date of Last Report
03/14/1996

2. Principal Place of Business

2a. Mailing Address

21 2901 Clint Moore Rd.

26 Suite, Apt. #, etc.

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 #424

28 City & State

24 Boca Raton, FL

29 City & State

25 33496

30 Zip

26 USA

31 Country

4. FEI Number
59-2508240

Applied For
Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KAREN KLEFTAD
8413 STAGE COACH LANE
BOCA RATON FL 33496

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD President (D) ☐ DELETE

NAME RASKIN, KATHLEEN
STREET ADDRESS 8549 SURREY LANE
CITY-ST-ZIP BOCA RATON FL

TITLE SD ☒ DELETE

NAME FIEBERT, LINDA
STREET ADDRESS 8297 BRIDLE PATH
CITY-ST-ZIP BOCA RATON FL

TITLE TD ☒ DELETE

NAME KLEFTAD, KAREN
STREET ADDRESS 8413 STAGE COACH LANE
CITY-ST-ZIP BOCA RATON FL

TITLE SD ☒ DELETE

NAME KLEPSTAD, KAREN
STREET ADDRESS 8413 STAGE COACH LANE
CITY-ST-ZIP BOCA RATON FL

TITLE ☒ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE Treasurer - Director (TD) ☐ Change ☒ Addition

1.2 NAME Matthew Rector
1.3 STREET ADDRESS 17962 Wagonwheel Drive
1.4 CITY-ST-ZIP Boca Raton, FL 33496

2.1 TITLE Secretary (SD) Director ☐ Change ☒ Addition

2.2 NAME maria hermanowski (D)
2.3 STREET ADDRESS 8298 Bridle Path
2.4 CITY-ST-ZIP Boca Raton, FL 33496

3.1 TITLE Vice President (D) Director ☐ Change ☒ Addition

3.2 NAME Brian Battaglia
3.3 STREET ADDRESS 8233 Stagecoach Lane
3.4 CITY-ST-ZIP Boca Raton, FL 33496

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

Signature

1/17/98 05/14/1985

CR2E037 (9/96)