

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 11, 2001 8:00 am
Secretary of State

04-16-2001 90479 003 ****61.25
 09-11-2001 90006 006 ****61.25

DOCUMENT # N12846

1. Entity Name

FAIRFIELD AT BOCA ASSOCIATION, INC.

Principal Place of Business

% GLEN MANAGEMENT SVCS
 301 W CAMINO GARDENS
 BOCA RATON FL 33432

Mailing Address

% GLEN MANAGEMENT SVCS
 PO BOX 1390
 BOCA RATON FL 33429

2. Principal Place of Business

5255 N. FEDERAL HWY
 Suite, Apt. #, etc. **SECOND FLOOR**
~~THIRD FLOOR~~

3. Mailing Address

5255 N. FEDERAL HWY
 Suite, Apt. #, etc. **SECOND FLOOR**
~~THIRD FLOOR~~



DO NOT WRITE IN THIS SPACE

City & State

BOCA RATON FL

City & State

BOCA RATON FL

4. FEI Number

59-2662554

Applied For

Not Applicable

Zip

33487

Country

USA

Zip

33487

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GLEN, ANDREW
301 W CAMINO GARDENS BLVD
SUITE 200
BOCA RATON FL 33432

7. Name and Address of New Registered Agent

Name **Kelly PATRICK Whalen**
 Street Address (P.O. Box Number is Not Acceptable)
5255 N. FEDERAL HWY
~~THIRD FLOOR~~ **SECOND FLOOR**
 City **BOCA RATON FL** Zip Code **33487**

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

After September 12, 2001, min. will be \$236.25

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

TITLE	D	☐ Delete
NAME	BORRELLO, VINCENT	
STREET ADDRESS	21300 LENNOX DRIVE	
CITY-ST-ZIP	BOCA RATON FL	
TITLE	PD	☒ Delete
NAME	D'ANGELO, CARMEN	
STREET ADDRESS	21300 LENNOX DRIVE	
CITY-ST-ZIP	BOCA RATON FL	
TITLE	SD	☐ Delete
NAME	SKOLE, JUDY	
STREET ADDRESS	21300 LENNOX DRIVE	
CITY-ST-ZIP	BOCA RATON FL	
TITLE	SD	☐ Delete
NAME	SCHREIBER, CRAIG	
STREET ADDRESS		
CITY-ST-ZIP		
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	PD	☒ Change ☐ Addition
NAME	Borrello, Vincent	
STREET ADDRESS	21300 Lennox Drive	
CITY-ST-ZIP	BOCA RATON FL	
TITLE	VD	☐ Change ☒ Addition
NAME	BRADFORD, RAYMOND	
STREET ADDRESS	21300 Lennox Drive	
CITY-ST-ZIP	BOCA RATON, FL	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	TD	☐ Change ☒ Addition
NAME	SCHREIBER, CRAIG	
STREET ADDRESS	21300 Lennox Drive	
CITY-ST-ZIP	BOCA RATON, FL 33486	
TITLE	D	☐ Change ☒ Addition
NAME	HASJAR, RICHARD	
STREET ADDRESS	21300 Lennox Drive	
CITY-ST-ZIP	BOCA RATON FL	
TITLE		☐ Change ☒ Addition
NAME		
STREET ADDRESS	21300 LENNOX DRIVE	
CITY-ST-ZIP	BOCA RATON FL	

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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Vincent S Borrello **8/21/00**

11/01/01 CH2E037 (5/01)