

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N13127

FILED
Aug 30, 2003
Secretary of State

Entity Name: RABBIT HOLLOWE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2320 RABBIT HOLLOWE CIRCLE
DELRAY BEACH, FL 33445 US

New Principal Place of Business:

2360 RABBIT HOLLOWE CIRCLE
DELRAY BEACH, FL 33445 US

Current Mailing Address:

4801 LINTON BLVD. 11A #504
DELRAY BEACH, FL 33445 US

New Mailing Address:

FEI Number: 59-2743573

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KING, WALTER
2320 RABBIT HOLLOWE CIRCLE
DELRAY BEACH, FL 33445 US

Name and Address of New Registered Agent:

BOCCIA, GREGORY
2360 RABBIT HOLLOWE CIRCLE
DELRAY BEACH, FL 33445 US

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: GREGORY BOCCIA

08/30/2003

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: STAMPNICK, GREG
Address: 3440 RABBIT HOLLOWE CIRCLE
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: SD () Delete
Name: NOELL, DEBORAH
Address: 2410 RABBIT HOLLOWE CIRCLE
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: PD () Delete
Name: KING, WALTER
Address: 2320 RABBIT HOLLOWE CIRCLE
City-St-Zip: DELRAY BEACH, FL 33445

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: BOCCIA, GREGORY
Address: 2360 RABBIT HOLLOWE CIRCLE
City-St-Zip: DELRAY BEACH, FL 33445

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GREGORY BOCCIA

PD

08/30/2003

Electronic Signature of Signing Officer or Director

Date