

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 06, 2001 8:00 am
Secretary of State

04-06-2001 90061 037 ****70.00

DOCUMENT # N15230

1. Entity Name

ASCOT PROPERTY OWNERS' ASSOCIATION, INC.

Principal Place of Business

Mailing Address

5295 TOWN CENTER RD. #200
 C/O LANG MANAGEMENT CO.
 BOCA RATON FL 33486

5295 TOWN CENTER RD. #200
 C/O LANG MANAGEMENT CO.
 BOCA RATON FL 33486

H0025964



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

21045 Commercial Tr
 Suite, Apt. #, etc.

21045 Commercial Tr
 Suite, Apt. #, etc.

City & State

City & State

~~Boca Raton, FL~~

~~Boca Raton, FL~~

4. FEI Number

59-2734199

Applied For

Not Applicable

Zip

33486

Country

USA

Zip

33486

Country

USA

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ISAACSON, WILLIAM K.
 5295 TOWNCENTER RD, STE 200
 BOCA RATON FL 33486

Name

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

21045 COMMERCIAL TRAIL

City

Boca Raton

FL

Zip Code

33486

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**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
 NAME FTENER, LLYOD Delete
 STREET ADDRESS 5413 ASCOT BEND
 CITY-ST-ZIP BOCA RATON FL 33496

TITLE TD
 NAME NORMAN BAROFSKY Change Addition
 STREET ADDRESS 5293 Ascot Bend
 CITY-ST-ZIP BOCA RATON, FL 33496

TITLE VPD
 NAME GALPERN, LOUISE Delete
 STREET ADDRESS 5364 ASCOT BEND
 CITY-ST-ZIP BOCA RATON FL 33496

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP Change Addition

TITLE SD
 NAME ABRAMS, AL Delete
 STREET ADDRESS 5437 ASCOT BEND
 CITY-ST-ZIP BOCA RATON FL 33496

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP Change Addition

TITLE TD
 NAME LEVY, JOANN Delete
 STREET ADDRESS 5455 ASCOT BEND
 CITY-ST-ZIP BOCA RATON FL

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP Change Addition

TITLE D
 NAME DWOSH, JERRY Delete
 STREET ADDRESS 5359 ASCOT BEND
 CITY-ST-ZIP BOCA RATON FL 33496

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP Change Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP Change Addition

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:

REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)