

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 20, 2002 8:00 am
Secretary of State

02-20-2002 90167 033 ****70.00

DOCUMENT # N20588

1. Entity Name

STONEBROOK AT COUNTRY WALK HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

14601 COUNTRY WALK DR
 MIAMI FL 33186
 US

P.O. BOX 924176
 HOMESTEAD FL 33092
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0036800

Applied For

Not Applicable

5. Certificate of Status Desired

☒ XX

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GOODMAN, GUENTHER J
 10723 SW 104 ST
 MIAMI FL 33176

Name

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

City

FL

Zip Code

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 **VPD Vice President** ☐ Delete
 NAME **MENDEZ, CARLOS**
 STREET ADDRESS **14601 COUNTRY WALK DR**
 CITY-ST-ZIP **MIAMI FL 33186**

TITLE **Treasurer** ☐ Change ☒ Addition
 NAME **Joseph Emanuel**
 STREET ADDRESS **14511 SW 138 PL**
 CITY-ST-ZIP **Miami, FL 33184**

TITLE **SD Secretary** ☐ Delete
 NAME **EMANUEL, LOISBETH**
 STREET ADDRESS **14511 SW 138TH PLACE**
 CITY-ST-ZIP **MIAMI FL 33186**

TITLE **Director** ☐ Change ☒ Addition
 NAME **Ana Maria Martinez**
 STREET ADDRESS **14601 country w**
 CITY-ST-ZIP **Miami, FL 33186**

TITLE **TD** ☒ Delete
 NAME **RICHMAN, STEVEN**
 STREET ADDRESS **14601 COUNTRY WALK DR**
 CITY-ST-ZIP **MIAMI FL 33186**

TITLE **Director** ☐ Change ☒ Addition
 NAME **Joseph Morales**
 STREET ADDRESS **14601 Cantry Walk Dr**
 CITY-ST-ZIP **Miami FL 33186**

TITLE **D** ☒ Delete
 NAME **ORTIZ, PABLO**
 STREET ADDRESS **14601 COUNTRY WALK DRIVE**
 CITY-ST-ZIP **MIAMI FL**

TITLE **Director** ☐ Change ☒ Addition
 NAME **Deborah Morales-Tristan**
 STREET ADDRESS **14601 country walk Drive**
 CITY-ST-ZIP **Miami, FL 33184**

TITLE **P** ☐ Delete
 NAME **DAWES, ORY M**
 STREET ADDRESS **14601 COUNTRY WALK DRIVE**
 CITY-ST-ZIP **MIAMI FL 33186**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** ☒ Delete
 NAME **KETZ, PAUL**
 STREET ADDRESS **14601 COUNTRY WALK DR**
 CITY-ST-ZIP **MIAMI FL 33186**

TITLE ☐ Change ☐ Addition
 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/02 305 238-9336
 Date Daytime Phone #

CR2E037 (9/01)