FILED 2003 NOT-FOR-PROFIT CORPORATION Feb 10, 2003 8:00 am **UNIFORM BUSINESS REPORT (UBR)** Secretary of State DOCUMENT # N22224 02-10-2003 90158 026 ****61.25 1. Entity Name EL CID/PROSPECT PARK/SOUTHLAND PARK HOME OWNER'S ASSOCIATION, INC. Principal Place of Business Mailing Address P O BOX 6055 P O BOX 6055 W. PALM BEACH FL 33405-7055 W. PALM BEACH FL 33405-7055 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State 4. FEI Number 65-0123038 Applied For City & State Not Applicable Zip Zip Country \$8.75 Additional Country Certificate of Status Desired Fee.Required. ಜಾ,≓≣ಾಜ್ -6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ENGELS-GULDEN, DOROTHY Street Address (P.O. Box Number is Not Acceptable) 220 SUNRISE AVE. STE. 100 PALM BCH. FL 33480 City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Florida Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. (10/02)PD Delete TITLE Change XX Addition TIT: F D ENGELS-GULDEN, DOROTHY NAME NAME Collins, Jeff STREET ADDRESS 220 SUNRISE AVE., STE. 100 STREET ADDRESS **CR2E037** 332 Monroe Dr. West Palm Beach, FL 33405 CITY-ST-ZIP CITY-ST-ZIP PALM BCH. FL VP XX Delete TITLE Change v Addition TITLE D PRICE, JAN NAME NAME Barnes, Stephen 222 RUGBY RD. STREET ADDRESS STREET ADDRESS 203-Westminster-Rd- West-Palm-Bch, FL 33405 CITY-ST-ZIP CITY-ST-ZIP W. PALM BEACH FL Addition D TITLE Change TITLE Delete HERB, BENN NAME NAME STREET ADDRESS **112 MONROE DRIVE** STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP W. PALM BEACH FL VΡ D Delete TITLE Change Addition TITLE Kino; Gregory KINO. GREGORY NAME NAME STREET ADDRESS STREET ADDRESS 311 WESTMINSTER PLACE CITY-ST-ZIP CITY-ST-ZIP W. PALM BEACH FL D Addition TITLE Delete TITLE Change VOLK. LORI NAME NAME STREET ADDRESS STREET ADDRESS 325 ALBERMARLE ROAD CITY-ST-ZIP CITY-ST-ZIP W. PALM BEACH FL ST Change Addition D Delete TIT: F TITI F **RIELLY, SUSAN** ΝΔΜΕ NAME STREET ADDRESS STREET ADDRESS 3217 WASHINGTON ROAD CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 3340 fling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director d to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 in the execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 in the execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 in the execute the state of the execute the 12. I hereby certify that the information supplier with e and accurate and that my signature s ed to execute this report as required b all other like empowered. indicated on this report or supplementa of the corporation or the receiver of trus changed, or on an attac nent with a SIGNATURE: