

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N25140

1. Entity Name

BRISTOL AT HUNTERS RUN CONDOMINIUM ASSOCIATION,

Principal Place of Business

3700 CLUBHOUSE LANE
BOYNTON BEACH FL 33436

Mailing Address

3700 CLUBHOUSE LANE
BOYNTON BEACH FL 33436

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

LEVINE, JAY S
2500 N MILITARY TRAIL
STE 275
BOCA RATON FL 33431

7. Name and Address of New Registered Agent

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

TITLE TD ☐ Delete
NAME CHORNEY, IRVING
STREET ADDRESS 3700 CLUBHOUSE LANE
CITY-ST-ZIP BOYNTON BEACH FL 33436

TITLE VD ☐ Delete
NAME HERMAN, MALCOLM
STREET ADDRESS 3700 CLUBHOUSE LANE
CITY-ST-ZIP BOYNTON BEACH FL 33436

TITLE PD ☐ Delete
NAME NEWMAN, ALVIN
STREET ADDRESS 3700 CLUBHOUSE LANE
CITY-ST-ZIP BOYNTON BCH FL 33436

TITLE SD ☐ Delete
NAME GOLDBERG, BERNARD
STREET ADDRESS 3700 CLUBHOUSE LN
CITY-ST-ZIP BOYNTON BCH FL 33436

TITLE D ☐ Delete
NAME POSNICK, IRVING
STREET ADDRESS 3700 CLUBHOUSE LANE
CITY-ST-ZIP BOYNTON FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

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

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

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

FILED
May 18, 2001 8:00 am
Secretary of State

05-18-2001 91241 050 ****61.25

551501



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0090037

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

CR2E037 (10/00)

2/21/2001 561-734-5000