

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N25165

1. Entity Name

THE PROPERTY OWNERS ASSOCIATION OF LAUDERDALE-BY

FILED
May 12, 2000 8:00 am
Secretary of State

05-12-2000 90041 023 ****61.25

Principal Place of Business

Mailing Address

C/O DOLORES SAN MIGUEL
255 COMMERCIAL BLVD #205
LAUDERDALE-BY-THE-SEA FL 33308-4419

255 COMMERCIAL BLVD. #200
LAUDERDALE-BY-THE-SEA FL 33308-4419
US

2. Principal Place of Business

3. Mailing Address

4442 SEA GRAPE DRIVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

LAUDERDALE BY THE SEA, FL

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip

Country

Zip

Country

33308-4419

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

ECKHARDT, SUNNY
4453 E. TRADEWINDS AVE
LAUDERDALE BY THE SEA FL 33308

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 PD ☐ Delete
NAME EKHARDT, SUNNY
STREET ADDRESS 4453 E TRADEWINDS
CITY-ST-ZIP LAUDERDALE-BY-SEA FL

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

TITLE VPD ☒ Delete
NAME MIELE, LOUIS DR.
STREET ADDRESS 4751 BAYVIEW DR.
CITY-ST-ZIP FT. LAUDERDALE FL

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

TITLE SD ☒ Delete
NAME REICHENSTEIN, MARGARET
STREET ADDRESS 254 ALGIERS AVENUE
CITY-ST-ZIP LAUDERDALE-BY-SEA FL

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

TITLE TD ☐ Delete
NAME SAN MIGUEL, DELORES
STREET ADDRESS 4442 SEA GRAPE DR.
CITY-ST-ZIP LAUDERDALE BY THE SEA FL

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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:

Sunny Eckhardt
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/27/2000

954-772-2384

CR2E037 (9/99)