2001 UNIFORM BUSINESS REPORT (UBR) FILED N25473 DOCUMENT # Mar 15, 2001 8:00 am Secretary of State 1. Entity Name CULONY POINT PROPERT OWNERS ASSOCIATION IMC 03-15-2001 90031 001 ****61.25 Principal Place of Business Mailing Address P.O. BOX 810772 P.O. BOX 810772 BUCA PATON, FL3348-772 BOCA RATION, FL 33481-772 VECCEUMA 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEL Number 65-0159205 City & State City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HOLZBERG, JESSE Street Address (P.O. Box Number is Not Acceptable) 2305 NW 6715-STREET ROCA RATOR, FL 33496 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. SIGNATURE DATE FILE NOW: 9. Election Campaign Financing Make Check Payable to-\$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61,25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. ☐ Change ☐ Addition TITLE TITLE Delete HOLZBERG, JESSE 2305 MW 67th STREET BOCA PATON, FL 33451 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Addition Change TITLE ☐ Delete TITLE MILLS RAY 2310 NW 67Th STREET NAME NAME STREET ADDRESS STREET ADDRESS RICA RATION, PL 33496 CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE □ Delete TITLE POPOVICH, EDWARD A 2311 NW 67TH STREET NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BUCA RATION, FZ 3345C CITY-ST-ZIP Delete ☐ Change 🗭 Addition CUMMINS RICHMOR 2317NW 66H DR SPARGO, RUBERT 16 6701 NW 2340 WAY STREET ADDRESS STREET ADDRESS BOCA RATON, PL 33456 CITY-ST-ZIP CITY-ST-ZIP BOCA RATOU, FZ 33956 D TITLE Change ☐ Addition TITLE Detete BOLZ, CHARLES 6741 NW ZZRO WAY NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BUCA RATION FR 33496 CITY-ST-ZIP TITLE ☐ Change ☐ Addition ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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 of 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 additest, with all other like empowered. KUBERT W. SPARGO 6 MARCH 2011 SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

COLONY POINT

Property Owners Association, Inc. P. O. Box 810772 Boca Raton, FL 33481-0772

Tuesday, March 06, 2001

Uniform Business Report Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500 AU33350