

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N25796

1. Entity Name

THE LAKES AT LA PAZ CONDOMINIUM ASSOCIATION, INC

FILED

00 MAR 29 AM 12:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C0046798



DO NOT WRITE IN THIS SPACE

03-99-00 90060 003 6/21

Principal Place of Business

7507 LAPAZ BLVD.
BOCA RATON FL 33433
US

Mailing Address

C/O POINTE MGMT GROUP
7540 U.S. HWY. ONE #104
LANTANA FL 33462-6063

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

75 NE 6th Ave

202

Delray Beach, FL

33483

4. FEI Number
65-0050470

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ESTEBANEZ, ERIC
C/O POINTE MANAGEMENT
7540 U.S. HIGHWAY ONE, STE. 104
LANTANA FL 33482

7. Name and Address of New Registered Agent

Name
Pointe Mgmt Group

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 resigning)

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	D	☐ Delete
NAME	LEVY, ROSE	
STREET ADDRESS	7519 LA PAZ C207	
CITY-ST-ZIP	BOCA RATON FL 33433	
TITLE	PD	☐ Delete
NAME	LENS, BETTY	
STREET ADDRESS	7507 LAPAZ BLVD, #N102	
CITY-ST-ZIP	BOCA RATON FL 33433	
TITLE	SD	☒ Delete
NAME	BOMMARITO, MARIE	
STREET ADDRESS	7519 LA PAZ BLVD. C405	
CITY-ST-ZIP	BOCA RATON FL 33433	
TITLE	TD	☒ Delete
NAME	KOHN, LARRY	
STREET ADDRESS	7507 LAPAZ BLVD. N305	
CITY-ST-ZIP	BOCA RATON FL	
TITLE	VPD	☐ Delete
NAME	SCHNIEDER, MAXINE	
STREET ADDRESS	7519 LAPAZ BLVD., #C-108	
CITY-ST-ZIP	BOCA RATON FL 33433	
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	T.D.	☐ Change ☒ Addition
NAME	ARON Sweetman	
STREET ADDRESS	7519 Lapaz Blvd # C 301	
CITY-ST-ZIP	Boca Raton, FL 33433	
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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/31