

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N25975

1. Entity Name

GOLF COLONY HOMEOWNERS' ASSOCIATION, INC.

FILED

Apr 24, 2001 8:00 am  
Secretary of State

04-24-2001 90051 010 \*\*\*\*61.25

Principal Place of Business

Mailing Address

C/O CUSTOM PROPERTY MANAGEMENT  
2328 S. CONGRESS, SUITE 2A  
WEST PALM BEACH FL 33406  
US

C/O CUSTOM PROPERTY MANAGEMENT  
2328 S. CONGRESS, SUITE 2A  
WEST PALM BEACH FL 33406  
US

2. Principal Place of Business

C/O MANAGEMENT SERVICES

3. Mailing Address

639 E. OCEAN AVE

Suite, Apt. #, etc.

SUITE 204

Suite, Apt. #, etc.

SUITE 204

City & State

BOYNTON BEACH, FL

City & State

BOYNTON BEACH, FL

Zip

33435

Country

USA

Zip

33435

Country

USA

4. FEI Number

65-0198704

Applied For

Not Applicable

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

GLICKMAN, LARRY Z. ESQ.  
% SACHS & SAX, P.A.  
301 YAMATO ROAD, SUITE 4150  
BOCA RATON FL 33431

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 DT ☐ Delete  
NAME LASSITER, KENNETH  
STREET ADDRESS 6131 HOOK LANE  
CITY-ST-ZIP BOYNTON BCH. FL 33437

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

TITLE D ☐ Delete  
NAME ROSENBERG, SILVIA  
STREET ADDRESS 6037 GOLF VILLAS DR  
CITY-ST-ZIP BOYNTON BEACH FL

TITLE SD ☒ Change ☐ Addition  
NAME ROSENBERG, SILVIA  
STREET ADDRESS 6037 GOLF VILLAS DRIVE  
CITY-ST-ZIP BOYNTON BEACH FL 33437

TITLE PD ☐ Delete  
NAME RUBINOVITZ, MILDRED  
STREET ADDRESS 6032 GOLF VILLAS DR  
CITY-ST-ZIP BOYNTON BCH. FL

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

TITLE SD ☒ Delete  
NAME STEIN, LEWIS  
STREET ADDRESS 6055 GOLF VILLAS DR  
CITY-ST-ZIP BOYNTON BCH. FL

TITLE RD ☐ Change ☒ Addition  
NAME ROBERT CAMERON  
STREET ADDRESS 6089 PITCH LANE  
CITY-ST-ZIP BOYNTON BEACH, FL 33437

TITLE VD ☐ Delete  
NAME DUBIN, JOSEPH  
STREET ADDRESS 6056 GOLF VILLAS DRIVE  
CITY-ST-ZIP BOYNTON BEACH FL 33437

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/01 584-792-6104

Date Daytime Phone #

CR2E037