

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2001 8:00 am
Secretary of State

04-23-2001 90145 050 *****70.00

0055169

DOCUMENT # N27325

1. Entity Name

FISHERMAN'S WHARF PROPERTY OWNERS ASSOCIATION, I

Principal Place of Business

**337 E. INDIANTOWN RD
 SUITE 8
 JUPITER FL 33477
 US**

Mailing Address

**337 E. INDIANTOWN ROAD.
 SUITE 8
 JUPITER FL 33477
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0089012

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**DENHOLTZ, STEVEN J.
 337 INDIANTOWN RD
 SUITE 8
 JUPITER FL 33477**

7. Name and Address of New Registered Agent

Name

Stewart F. Denholtz

Street Address (P.O. Box Number is Not Acceptable)

**337 E Indiantown Road
 Suite 8**

City

Jupiter,

FL

Zip Code

33477

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)

4/13/01
 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 ☐ Delete
 NAME **PD**
 STREET ADDRESS **DENHOLTZ, JACK**
 CITY-ST-ZIP **337 E. INDIANTOWN RD
 JUPITER FL**

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **DENHOLTZ, STEWART**
 CITY-ST-ZIP **337 E. INDIANTOWN RD
 JUPITER FL**

TITLE ☒ Delete
 NAME **STD**
 STREET ADDRESS **DENHOLTZ, STEVE**
 CITY-ST-ZIP **337 E INDIANTOWN RD
 JUPITER FL**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☐ Addition
 NAME **Vice President**
 STREET ADDRESS **Denholtz, Jack**
 CITY-ST-ZIP **337 E Indiantown Road, Suite 8
 Jupiter, FL 33477**

TITLE ☒ Change ☐ Addition
 NAME **President**
 STREET ADDRESS **Denholtz, Stewart**
 CITY-ST-ZIP **337 E Indiantown Road, Suite 8
 Jupiter, FL 33477**

TITLE ☐ Change ☒ Addition
 NAME **Secretary**
 STREET ADDRESS **McNamara, Colleen J.**
 CITY-ST-ZIP **337 E Indiantown Road, Suite 8
 Jupiter, FL 33477**

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

3/30/01

561 743-8900

Date

Daytime Phone #

CR2E037 (10/00)