

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N28968

1. Entity Name

SAWGRASS ESTATES NORTH HOMEOWNERS ASSOCIATION, I

Principal Place of Business

C/O BENCHMARK PROPERTY MGMT
7932 WILES RD
CORAL SPRINGS FL 33067

Mailing Address

C/O BENCHMARK PROPERTY MGMT
7932 WILES RD
CORAL SPRINGS FL 33067

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0126269

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

TONKS, JOSEPHINE
12111 N W 35TH ST
SUNRISE FL 33323

7. Name and Address of New Registered Agent

Name

Kaye & Roger PA

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

6261 NW 6 Way

City

Ft Lauderdale

FL

Zip Code

33309

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)

2/16/01

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 P
NAME TONKS, JOSEPHINE
STREET ADDRESS 12111 N W 35TH ST
CITY-ST-ZIP SUNRISE FL 33323 ☐ Delete

TITLE SD
NAME WEITZ, SAM
STREET ADDRESS 3471 N W 121ST AVE
CITY-ST-ZIP SUNRISE FL 33323 ☐ Delete

TITLE TD
NAME SOLOMAN, MARK
STREET ADDRESS 12125 NW 34 ST
CITY-ST-ZIP SUNRISE FL ☐ Delete

TITLE VD
NAME MOELLER, CHRISTY
STREET ADDRESS 3449 N W 122ND ST
CITY-ST-ZIP SUNRISE FL 33323 ☐ Delete

TITLE D
NAME CASTRO, RON
STREET ADDRESS 3400 N W 121ST AVE
CITY-ST-ZIP SUNRISE FL 33323 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Director-President ☒ Change ☐ Addition
NAME Moeller, Christy
STREET ADDRESS 3449 NW 122 Ave
CITY-ST-ZIP Sunrise, FL 33323

TITLE Director-Sec ☒ Change ☐ Addition
NAME Tonks, Josephine
STREET ADDRESS 12111 NW 35 St
CITY-ST-ZIP Sunrise, FL 33323

TITLE Director ☒ Change ☐ Addition
NAME Weitz, Sam
STREET ADDRESS 3471 NW 121 Ave
CITY-ST-ZIP Sunrise, FL 33323

TITLE Director ☐ Change ☒ Addition
NAME Gonzalez, Ed
STREET ADDRESS 3490 NW 121 Ave
CITY-ST-ZIP Sunrise, FL 33323

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

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

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:

Christy Moeller

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/16/01

Date

Daytime Phone #

FILED
Apr 02, 2001 8:00 am
Secretary of State

04-02-2001 90313 037 ****61.25

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DO NOT WRITE IN THIS SPACE

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