

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 12, 2000 8:00 am
Secretary of State

07-12-2000 90007 035 ****70.00

DOCUMENT # N31769
1. Entity Name PHEASANT RUN HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business 5710 S. DIXIE HWY, STE A WEST PALM BEACH, FL 33405
Mailing Address 5710 S. DIXIE HWY SUITE A WEST PALM BEACH, FL 33405 USA

2. Principal Place of Business C/O BANYAN PROPERTY MGMT SERV 2328 S. CONGRESS AVE, SUITE 100 WEST PALM BEACH, FL 33406
3. Mailing Address c/o BANYAN PROPERTY MGMT SUITE, APT. #, ETC. 2328 S. CONGRESS AVE, STE 100 WEST PALM BEACH, FL 33406

DO NOT WRITE IN THIS SPACE

City & State West Palm Beach, FL 33406
4. FEI Number 65-0239441
5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent DAVID M. RUELKE 116 PLUMAGE LN WEST PALM BEACH, FL 33415
7. Name and Address of New Registered Agent DAVID M. RUELKE 116 PLUMAGE LN WEST PALM BEACH, FL 33415

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ **DATE** _____

FILE NOW: FEE IS \$61.25 **9. Election Campaign Financing** **\$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 NAME VICE PRESIDENT STREET ADDRESS ROWE, DORIS CITY-ST-ZIP 86 PHEASANT RUN BLVD WEST PALM BEACH, FL 33415	<input checked="" type="checkbox"/> Delete	TITLE NAME DAVID M. RUELKE, Pres/D STREET ADDRESS 116 PLUMAGE LN CITY-ST-ZIP WEST PALM BEACH, FL 33415	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME JEANETTE BORG, VICE PRES/D STREET ADDRESS 15805 MEADOW WOOD DR CITY-ST-ZIP WELLINGTON, FL 33414	<input type="checkbox"/> Delete	TITLE NAME JACKIE BLANCO, S/T/D STREET ADDRESS 99 PLUMAGE LN CITY-ST-ZIP WEST PALM BEACH, FL 33415	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME DEBORAH GIPPER, SEC/TREAS STREET ADDRESS 67 PLUMMAGE LN CITY-ST-ZIP WEST PALM BEACH, FL 33415	<input checked="" type="checkbox"/> Delete	TITLE NAME BART BANNER, DIRECTOR STREET ADDRESS 63 PLUMMAGE LN CITY-ST-ZIP WEST PALM BEACH, FL 33415	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME BART BANNER, DIRECTOR STREET ADDRESS 63 PLUMMAGE LN CITY-ST-ZIP WEST PALM BEACH, FL 33415	<input checked="" type="checkbox"/> Delete	TITLE NAME DAVID RUELKE, PRESIDENT STREET ADDRESS 116 PLUMMAGE LN CITY-ST-ZIP WEST PALM BEACH, FL 33415	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME DAVID RUELKE, PRESIDENT STREET ADDRESS 116 PLUMMAGE LN CITY-ST-ZIP WEST PALM BEACH, FL 33415	<input checked="" type="checkbox"/> Delete	TITLE NAME GORDON BROOM, DIRECTOR STREET ADDRESS 86 PLUMAGE LN CITY-ST-ZIP WEST PALM BEACH, FL 33415	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME GORDON BROOM, DIRECTOR STREET ADDRESS 86 PLUMAGE LN CITY-ST-ZIP WEST PALM BEACH, FL 33415	<input checked="" type="checkbox"/> Delete		

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: David M Ruelke **DAVID M RUELKE, PRES** **(561)649-8585**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #