## 2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## Apr 09, 2003 8:00 am Secretary of State **DOCUMENT # N32415** 1. Entity Name 04-09-2003 90146 006 \*\*\*\*61.25 CACHE' HOMEOWNERS' ASSOCIATION, INC. Principal Place of Business Mailing Address 8789 FOREST HILLS BLVD 8789 FOREST HILLS BLVD CORAL SPRINGS FL 33065 CORAL SPRINGS FL 33065 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc CHECK HERE IF MAKING CHANGES City & State City & State FEI Number 65-0180370 Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DOUCETTE, JOHN Street Address (P.O. Box Number is Not Acceptable) 8759 FOREST HILLS BLVD CORAL SPRINGS FL 33065 City 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. it am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 П Trust Fund Contribution. Florida Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE Delete TITLE アカ Change Addition DOUCETTE, JOHN NAME NAME BULD STR. T ADDRESS 8759 FOREST HILLS BLVD STREET ADDRESS SPAINGS FL 33065 CITY-ST-ZIP Coral Springs FL 33065 CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Addition DECHTER, JOEL NAME NAME 8737 FOREST HILLS BLVD STREET ADDRESS STREET ADDRESS <del>~</del>( <u>≠</u> \*\*\*• CITY-ST-ZIP CORAL SPRINGS FL 33065 CITY-ST-ZIP 5 D FA Change ☐ Delete TITLE ☐ Addition GOODMAN, ERIC NAME NAME 8767 FOREST HILLS BLVD STREET ADDRESS STREET ADDRESS CITY-ST-7IP Coral Springs FL 33065 CITY-ST-ZIP ۷D TITLE Delete Addition TITLE MURPHY, COLIN NAME NAME 8751 FOREST HILLS BLUD STREET ADDRESS 8765 FOREST HILLS BLVD STREET ADDRESS CITY-ST-ZIP CORAL SPRINGS FL 33065 CITY-ST-ZIP SD Delete TITLE TITLE ☐ Addition ☐ Change leë. Etta NAME NAME 8763 FOREST HILLS BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **CORAL SPRINGS FL 33065** CITY-ST-ZIP M Delete Addition TITLE TITLE

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.

STREET ADDRESS

CITY-ST-ZIP

**SIGNATURE** 

NAME

STREET ADDRESS

CITY-ST-ZIP

LUCAS, BARBARA M

8729 FOREST HILLS BLVD

CORAL SPRINGS FL 33065

FILED