

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N32848

1. Entity Name

OAKBROOK CORPORATE CENTRE PROPERTY OWNERS ASSOCI

Principal Place of Business

C/O BROCK DEVELOPMENT CORP
1551 FORUM PLACE, BLDG 100
WEST PALM BEACH FL 33401

Mailing Address

C/O BROCK DEVELOPMENT CORP
1551 FORUM PLACE, BLDG 100
WEST PALM BEACH FL 33401

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

NOT APPLICABLE

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

BROCK, PETER
1551 FORUM PLACE, BLDG 100
WEST PALM BEACH FL 33401

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
BROCK, PETER
1551 FORUM PLACE BLDG 100
WEST PALM BEACH FL 33401

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
BROCK, ANDREW
1551 FORUM PLACE BLDG 100
WEST PALM BEACH FL 33401

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VTD
BERNICK, LARRY
2401 PGA BOULEVARD, SUITE 280
PALM BEACH GARDENS FL 33410

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
KAHLENBERG, ARTHUR
1551 FORUM PLACE, BLDG., 100
WEST PALM BEACH FL 33401

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
SMITH, LAWRENCE W
701 US HIGHWAY ONE, STE 402
NORTH PALM BEACH FL 33408

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BERNICK, LARRY
2401 PGA BLVD., STE., 280
PALM BEACH GARDENS FL 33418

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE
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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

Date

Daytime Phone #

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

05-02-2001 90194 009 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)