

2000 UNIFORM BUSINESS REPORT (UBR)

2/1

DOCUMENT # N36429

1. Entity Name

COCOA PINE ESTATES HOMEOWNERS ASSOCIATION, INC.

FILED

May 01, 2000 8:00 am
Secretary of State

02-11-2000 90031 014 ****61.25

Principal Place of Business

1239 COCOANUT RD
BOCA RATON FL 33432
US

Mailing Address

1239 COCOANUT RD
BOCA RATON FL 33432-7709
US

2. Principal Place of Business

c/o Glen Management Services, Inc.
Suite, Apt. #, etc.

301 W. Camino Gardens Blvd, #200

City & State

BOCA RATON, FL

Zip

33432

Country

USA

3. Mailing Address

c/o Glen Management Services, Inc.
Suite, Apt. #, etc.

P.O. Box 1390

City & State

BOCA RATON, FL

Zip

33429

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0176322

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LANDVISION INC. OF FLORIDA
1239 COCOANUT ROAD
BOCA RATON FL FL 33432

7. Name and Address of New Registered Agent

Name
ANDREW C. Glen
Street Address (P.O. Box Number is Not Acceptable)
301 W. CAMINO GARDENS BLVD

Suite 200

City
BOCA RATON

FL

Zip Code
33432

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 \$61.259. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to FeesMake Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE
NAME PD
STREET ADDRESS RICKARD, NANCY PULTE
CITY-ST-ZIP 1239 COCOANUT ROAD
BOCA RATON FL 33432 ☐ DeleteTITLE
NAME SD
STREET ADDRESS LAHMAN, CHERIE
CITY-ST-ZIP ONE OCEAN BLVD., #304
BOCA RATON FL 33432 ☐ DeleteTITLE
NAME TD
STREET ADDRESS RICKARD, KEVIN
CITY-ST-ZIP 1239 COCOANUT RD.
BOCA RATON FL 33432 ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME RICK OLSON / PRESIDENT ☒ Change ☐ Add
STREET ADDRESS 12039 COCOA PINE DR.
CITY-ST-ZIP BOYNTON BEACH, FL 33436TITLE
NAME SUE
STREET ADDRESS RICHARD W. JOHNSON ☒ Change ☐ Add
CITY-ST-ZIP 12929 COCOA PINE DR.
BOYNTON BEACH, FL 33436TITLE
NAME Treasurer
STREET ADDRESS Arthur Ziv
CITY-ST-ZIP 12866 COCOA AVE-DR.
BOYNTON BEACH, FL 33436 ☒ Change ☐ AddTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AddTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AddTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Add

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

2/3/00

(561) 279-0064

Date

Daytime Phone #