

2000 UNIFORM BUSINESS REPORT (UBR)

3/

DOCUMENT # N37020

1. Entity Name

THE BUCKHEAD HOMEOWNERS ASSOCIATION, INC.

FILED
May 11, 2000 8:00 am
Secretary of State

03-28-2000 90098 049 ****61.25

Principal Place of Business

11636
11672 N.W. 5TH STREET
PLANTATION FL 33325
US

Mailing Address

11636
11672 N.W. 5TH STREET
PLANTATION FL 33325-1900
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0178282

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WOODWARD, SHIRLEY
11672 N.W. 5TH STREET
PLANTATION FL 33325

7. Name and Address of New Registered Agent

Name

Richard Gappen

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

11636 N.W. 5th St.

City

Plantation

FL

Zip Code

33325

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 Richard M. Gappen Pres.

Signature, typed or printed name of registered agent and title if applicable

Richard M. Gappen

(NOTE: Registered Agent signature required when reinstating)

3-10-00

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 S
NAME DIAMASE, LUIGI
STREET ADDRESS 11785 NW 5TH ST
CITY-ST-ZIP FORT LAUDERDALE FL 33325 ☒ Delete

TITLE T
NAME PUNYANI, SAT
STREET ADDRESS 11613 NW 5TH ST
CITY-ST-ZIP FORT LAUDERDALE FL 33325 ☐ Delete

TITLE P
NAME THORNTON, ROBERT
STREET ADDRESS 11748 NW 5TH ST
CITY-ST-ZIP PLANTATION FL 33325 ☒ Delete

TITLE D
NAME SAVITZ, CAROL
STREET ADDRESS 11600 N.W. 5TH STREET
CITY-ST-ZIP PLANTATION FL 33325 ☐ Delete

TITLE D
NAME FROSCH, BEN
STREET ADDRESS 11612 NW 5TH ST
CITY-ST-ZIP PLANTATION FL 33325 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P
NAME Richard Gappen
STREET ADDRESS 11636 N.W. 5th St
CITY-ST-ZIP Plantation, FL 33325 ☒ Change ☐ Addition

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

TITLE V
NAME Stan Wojcik
STREET ADDRESS 11648 N.W. 5th St.
CITY-ST-ZIP Plantation, FL 33325 ☒ Change ☐ Addition

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

TITLE S
NAME Laurie Mugue
STREET ADDRESS 11761 N.W. 5th St.
CITY-ST-ZIP Plantation, FL 33325 ☒ 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:

RENEWAL REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard M. Gappen

Date

3-10-00

Daytime Phone #

954-424-7966

CP2E037 (9/99)