

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N37948

1. Entity Name

HIBISCUS ISLAND MAINTENANCE ASSOCIATION, INC.

**FILED**  
**Mar 28, 2000 8:00 am**  
**Secretary of State**

03-28-2000 90095 041 \*\*\*\*61.25

Principal Place of Business

Mailing Address

~~1067 SHOTGUN RD~~  
~~SUNRISE FL 33320~~  
~~US~~

~~1067 SHOTGUN ROAD~~  
~~SUNRISE FL 33320 1000~~  
~~US~~



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

40 Castle Mgmt Inc.

3. Mailing Address

40 Castle Mgmt Inc.

Suite, Apt. #, etc.

P.O. Box 189013

Suite, Apt. #, etc.

P.O. Box 189013

City & State

Plantation FL

City & State

Plantation FL

4. FEI Number

65-0164753

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Zip

33318

Country

Zip

33318

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROSEN, ROSEN & KREILI  
 1625-N COMMERCE PKWY  
 STE 225  
 FT LAUDERDALE FL 33326

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 \_\_\_\_\_ DATE \_\_\_\_\_

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  Delete  
 NAME VPD  
 STREET ADDRESS PLATTS, MARGE  
 CITY-ST-ZIP 1260 BAYVIEW CIR.  
 FT. LAUDERDALE FL

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME PD  
 STREET ADDRESS MURREY, MITCH  
 CITY-ST-ZIP 2144 BAYVIEW CIR  
 FORT LAUDERDALE FL 33326

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME SD  
 STREET ADDRESS WINCELE, HOWARD  
 CITY-ST-ZIP 1344 BAYVIEW CIR  
 FT LAUDERDALE FL

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME T  
 STREET ADDRESS MARTIN, DICK  
 CITY-ST-ZIP 1430 SEABAY RD  
 FT LAUDERDALE FL 33326

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME SD  
 STREET ADDRESS CANTOR, JERRY  
 CITY-ST-ZIP 1450 Seabay Road  
 Weston, FL 33326

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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: Mitch Murrey **SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR** 2/16/00 (954) 792-6000 **Date** 2/16/00 **Daytime Phone #**

CR2E037 (9/99)