

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 01, 2001 8:00 am
Secretary of State

02-08-2001 90024 037 ****61.25

DOCUMENT # N39099

1. Entity Name

CORAL PALMS HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

6700 PINE IS. RD.
 TAMARAC FL 33321

Mailing Address

6700 PINE IS. RD.
 TAMARAC FL 33321

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

65-0315889

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

KAPLAN, MICKEY
 6712 PINE IS. RD.
 TAMARAC FL 33321

Name

ANTHONY P. LUCCA

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

6708 N. Pine Island Road

City

Tamarac

FL

Zip Code
33321

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

Anthony P. Lucca

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

Anthony P. Lucca, President

(NOTE: Registered Agent signature required when reinstating)

1/8/01

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	P	☒ Delete
NAME	GENTILE, SONNY	
STREET ADDRESS	6700 PINE IS. RD.	
CITY-ST-ZIP	TAMARAC FL 33321	
TITLE	VP	☐ Delete
NAME	GILBERT, NANCY	
STREET ADDRESS	6700 PINE IS. RD.	
CITY-ST-ZIP	TAMARAC FL 33321	
TITLE	S	☒ Delete
NAME	KAPLAN, MICKEY	
STREET ADDRESS	6700 PINE IS. RD.	
CITY-ST-ZIP	TAMARAC FL 33321	
TITLE	T	☒ Delete
NAME	MIKES, ROBERT	
STREET ADDRESS	6700 PINE IS. RD.	
CITY-ST-ZIP	TAMARAC FL 33321	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	P	☐ Change ☒ Addition
NAME	Anthony P. Lucca	
STREET ADDRESS	6708 North Pine Island Road	
CITY-ST-ZIP	Tamarac, Florida 33321	
TITLE	D	☒ Change ☐ Addition
NAME	Nancy Gilbert	
STREET ADDRESS	6718 North Pine Island Road	
CITY-ST-ZIP	Tamarac, Florida 33321	
TITLE	S	☐ Change ☒ Addition
NAME	Roger Krahl	
STREET ADDRESS	6794 North Pine Island Road	
CITY-ST-ZIP	Tamarac, Florida 33321	
TITLE	T	☐ Change ☒ Addition
NAME	Shirley A. Lucca	
STREET ADDRESS	6708 North Pine Island Road	
CITY-ST-ZIP	Tamarac, Florida 33321	
TITLE	VP	☐ Change ☒ Addition
NAME	Roger Dennis	
STREET ADDRESS	6790 North Pine Island Road	
CITY-ST-ZIP	Tamarac, Florida 33321	
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.

Shirley A. Lucca, Treasurer

SIGNATURE:

Shirley A. Lucca

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/12/01

DATE

(954) 524-3737

Daytime Phone #

CR2E037 (10/00)