

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

N39275

1. Entity Name

Ibis Property Owners Association, Inc.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 OCT 15 PM 12:17

Principal Place of Business

Mailing Address

2. Principal Place of Business

3. Mailing Address

8002 Sandhill Way East

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

West Palm Beach, FL

Zip

Country

Zip

Country

33412

USA

4. FEI Number

65-6211424

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Patricia A. Erdman

8002 Sandhill Way East

West Palm Beach, FL 33412

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)

300004653883--8

10/25/01 01000-007

*****61.25 *****61.25

FILE NOW: FEE IS \$61.25
After September 12, 2001, min. will be \$236.25

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 DP
NAME Clifford G. Wilson
STREET ADDRESS 9055 Ibis Blvd.
CITY-ST-ZIP West Palm Beach, FL 33412 ☐ Delete

TITLE DVP
NAME Patricia A. Erdman
STREET ADDRESS 8002 Sandhill Way East
CITY-ST-ZIP West Palm Beach, FL 33412 ☐ Delete

TITLE TD
NAME George Speer
STREET ADDRESS 9005 Ibis Blvd.
CITY-ST-ZIP West Palm Beach, FL 33412 ☐ Delete

TITLE DS
NAME Nancy Curran
STREET ADDRESS 8002 Sandhill Way East
CITY-ST-ZIP West Palm Beach, FL 33412 ☐ Delete

TITLE D
NAME Richard Brockway
STREET ADDRESS 9005 Ibis Blvd.
CITY-ST-ZIP West Palm Beach, FL 33412 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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

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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:

Patricia A. Erdman

10/01/01 561-630-2828

CR2E037 (5/01)