## **2002 UNIFORM BUSINESS REPORT (UBR)**

## FILED Apr 18, 2002 8:00 am s Secretary of State **DOCUMENT # N40005** 1. Entity Name NEWPORT COVE HOMEOWNERS ASSOCIATION, INC. 04-18-2002 90450 006 \*\*\*\*61 Principal Place of Business Mailing Address 6300 PARK OF COMMERCE BOULEVARD 591 BROKEN SOUND PKWY. **BOCA RATON FL 33487 BOCA RATON FL 33487** US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0308459 Not Applicable Ζiρ Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name: Street Address (P.O. Box Number is Not Acceptable) COMMUNITY ASSOCIATION SIC 951 BROKEN SOUND PKWY, #250 **BOCA RATON FL 33487** City Zip Code FI 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 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 PD TITI E TITLE CR2E037 (9/01) **Addition** Delete NAME STEINMETZ, IRA NAME Herley Bridge Blod. STREET ADDRESS 7568 STIRLING BRIDGE BLVD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **DELRAY BEACH FL 33446** KEAS'URER TITLE Change SERGIO INGUANZO NAME KRIVOY, EVELYN NAME 71 Jain Jale 1. 33 446 STREET ADDRESS 7809 STIRLING BRIDGE BLVD. STREET ADDRESS CITY-ST-ZIP **DELRAY BEACH FL 33446** CITY-ST-ZIP SD . Addition TITLE ☐ Delete TITLE Change TERMAN 14071 Blenlyon Court NAME SANDLER, EILEEN >-NAME Allray Beach STREET ADDRESS 7775 GREAT GLEN CIR. STREET ADDRESS CITY-ST-ZIP DELRAY BEACH FL 33446 CITY-ST-ZIP VON RAPACKT vPD Delete MADDY TITLE TITLE Change Addition STERNBACH, RUTH NAME 14239 Dunmoon Court NAME STREET ADDRESS 7838 STIRLING BRIDGE BLVD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DELRAY BEACH FL 33446 TITLE ☐ Delete TITLE Change Addition 7878 Sterley Bridge Blod NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Addition □ Delete TITLE Marde NAME NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section \$\frac{1}{4}9.07(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

STREET ADDRESS

City-St-7IP

SIGNATURE: 1

STREET ADDRESS

CITY-ST-ZIP

90 Fair Ille St

Daytime Phone #