

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N43584

1. Entity Name

REFLECTIONS AT ROCK CREEK HOMEOWNERS' ASSOCIATIO

FILED
Jan 27, 2001 8:00 am
Secretary of State

01-27-2001 90058 015 ****61.25

905886



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

C/O CASTLE GROUP
P. O. BOX 189013
PLANTATION FL 33318
US

C/O CASTLE GROUP
P.O. BOX 189013
PLANTATION FL 33318
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0285119

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

7. Name and Address of New Registered Agent

~~CASTLE PROPERTY SERVICES GROUP INC.~~
~~4450 W. SUNRISE BLVD.~~
~~SUITE 100-C~~
~~PLANTATION FL 33318~~

Name

Hyman & Kaplan, PA

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

150 W. Flagler Street

Suite 2701

City

Miami

FL

Zip Code
33130

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

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 NAME STREET ADDRESS CITY - ST - ZIP	PD LARRY FONS 11201 REVELLE RD. COOPER CITY FL	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D TOUHEY, MIKE 11313 RHAPSODY RD COOPER CITY FL	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BOSTON, CAROL 2711 REGALIA PL. COOPER CITY FL	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD GROSS, SOLOMON 11315 ROUNDELAY ROAD COOPER CITY FL 33026	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD CAREW, BARRY 2670 REGALIA WAY COOPER CITY FL 33026	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PT	☒ 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:

Barry Carew
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/10/01

(954) 792-6000

CR2E037 (10/00)