

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 21, 2001 8:00 am**  
**Secretary of State**

09-21-2001 90003 040 \*\*\*236.25

**DOCUMENT # N44231**

1. Entity Name

**HENDRICKS SITE PROPERTY OWNERS' ASSOCIATION, INC**

Principal Place of Business

**2800 BROADWAY  
RIVIERA BEACH FL 33404**

Mailing Address

**2800 BROADWAY  
RIVIERA BEACH FL 33404**

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

**65-0423111**

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

**HOLDER, DOUGLAS A JR  
1025 N FED HWY  
WEST PALM BEACH FL 33403**

Name **Douglas Holder Jr.**

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

**1025 N. Federal Hwy.**

City **Lake Park, Fla.**

**FL**

Zip Code

**(33403)**

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

**9/12/01**

**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 ☐ Delete  
NAME **PART**  
STREET ADDRESS **HOLDER, DOUGLAS A JR**  
CITY-ST-ZIP **529 S FLAGLER DR E-11  
WEST PALM BEACH FL 33401**

TITLE ☒ Change ☐ Addition  
NAME **1025 N. Federal Hwy.**  
STREET ADDRESS **Lake Park, FL 33403**  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME **PART**  
STREET ADDRESS **WATTS, LARRY V**  
CITY-ST-ZIP **540 PATLER SPINGS ST., STE 27E  
MARIETTA GA-30084**

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

TITLE ☐ Delete  
NAME **STD**  
STREET ADDRESS **GOOSENS, ROBERT J.P.**  
CITY-ST-ZIP **2800 BROADWAY  
RIVIERA BEACH FL**

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

TITLE ☐ Delete  
NAME **PART**  
STREET ADDRESS **WRIGHT, JERRY**  
CITY-ST-ZIP **1230 FAIRVIEW LN  
WEST PALM BEACH FL 33404**

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

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:

**SIGNATURE REQUIRED**

**9/12/01**

**(561)  
863-7359**

CR2E037 (5/01)