2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N49950

1. Entity Name

LANCASTER LAKES AT ABERDEEN ASSOCIATION, INC.

FILED
Mar 21, 2000 8:00 am
Secretary of State
03-21-2000 90058 036 ****61.25

Principal Place of Business	Mailing Address
951 BROKEN SOUND PKY STE 250 BOCA RATON FL 33487	951 BROKEN SOUND PKY STE 250 BOCA RATON FL 33487-3506

DO NOT WRITE IN THIS SPACE

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 65-0355389 ☐ 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
MESSINGER, JOEL 951 BROKEN SOUND PKWY. SUITE 250 BOCA RATON FL 33487	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 _____ DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 ARONOFF, MARTIN 8825 SHOAL CREEK LN BOYNTON BEACH FL 33437	☒ Delete	VPD Howard Marks 8928 Shoal Creek Lane Boynton Beach, FL 33437	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S/D PEARLMAN, JACQUELINE 8772 SHOAL CREEK LN BOYNTON BEACH FL 33437	☒ Delete	DS Beth Blank 8800 Shoal Creek Lane Boynton Beach, FL 33437	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T/D KLINGER, HERB 8912 SHOAL CREEK LN BOYNTON BEACH FL 33437	☐ Delete	TREASURER HERBERT KLINGER 8912 SHOAL CROSS BOYNTON BEACH FL 33437	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP BODERMAN, ELAINE 8836 SHOAL CREEK LN BOYNTON BEACH FL 33437	☐ Delete	PD	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E037 (9/99)

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 3/16/00 369-8136

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #