

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 91384 024 ****61.25

DOCUMENT # N50721

1. Entity Name

EGRET POINTE ASSOCIATION, INC.



Principal Place of Business

**6041 BRIGHTWATER TERRACE
BOYNTON BEACH FL 33437
US**

Mailing Address

**6300 PARK OF COMMERCE BLVD
BOCA RATON FL 33487
US**

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 **65-0388360**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**SWATT, MYRON I
6300 PARK OF COMMERCE BLVD
BOCA RATON FL 33487**

Name

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

City

FL

Zip Code

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> Delete
NAME	SIEGEL, PAUL	
STREET ADDRESS	6106 BRIGHTWATER TERR	
CITY-ST-ZIP	BOYNTON BEACH FL	
TITLE	DVPS	<input checked="" type="checkbox"/> Delete
NAME	RUDOLPH, NORMAN	
STREET ADDRESS	6077 BRIGHTWATER TERRACE	
CITY-ST-ZIP	BOYNTON BEACH FL 33437	
TITLE	DS	<input checked="" type="checkbox"/> Delete
NAME	JAFFE, GERRY	
STREET ADDRESS	6107 BRIGHTWATER TERR	
CITY-ST-ZIP	BOYNTON BEACH FL	
TITLE	DT	<input checked="" type="checkbox"/> Delete
NAME	PINKERT, ED	
STREET ADDRESS	6053 BRIGHTWATER TERRACE	
CITY-ST-ZIP	BOYNTON BEACH FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	WEINBERG, JOSEPH	
STREET ADDRESS	6112 BRIGHTWATER TERRACE	
CITY-ST-ZIP	BOYNTON BEACH FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VPD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WEINBERG, JOSEPH	
STREET ADDRESS	6112 BRIGHTWATER TERRACE	
CITY-ST-ZIP	BOYNTON BEACH, FL. 33437	
TITLE	DPD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GLICKSTEIN, ELLEN	
STREET ADDRESS	6113 BRIGHTWATER TERRACE	
CITY-ST-ZIP	BOYNTON BEACH, FL. 33437	
TITLE	DT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FORMAN, PAUL	
STREET ADDRESS	3058 BRIGHTWATER TERRACE	
CITY-ST-ZIP	BOYNTON BEACH, FL. 33437	
TITLE	DS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROSEN, MORTON	
STREET ADDRESS	6155 BRIGHTWATER TERRACE	
CITY-ST-ZIP	BOYNTON BEACH, FL. 33437	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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

Joseph Weinberg 4/22/03

CR2E037 (10/02)