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

2/4

FILED
Mar 03, 2003 8:00 am
Secretary of State
02-04-2003 90105 032 ****61.25

550127961

DOCUMENT # N93000000478

1. Entity Name
PRESERVE ESTATES AT CHAPEL TRAIL HOMEOWNERS ASSOCIATION, INC.

☐ CHECK HERE IF MAKING CHANGES

Principal Place of Business	Mailing Address
21000 N.E. 28TH AVE. SUITE 207 NORTH MIAMI BEACH FL 33180	P.O. BOX 821825 SOUTH FLORIDA FL 33082-1825

2. Principal Place of Business	3. Mailing Address
P.O. Box 821825	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: South Florida FL	City & State
Zip: 33082 Country: USA	Zip Country

4. FEI Number 65-0388400 ☐ 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
FERIA, BRENDA 940 NW 197 TERR PEMBROKE PINES FL 33029	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. 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD FERIA, BRENDA 940 NW 197 TERR PEMBROKE PINES FL 33029	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MULREY, SANDY 940 NW 199 TERR PEMBROKE PINES FL 33029	☒ Delete	TITLE PD / NAME / STREET ADDRESS / CITY-ST-ZIP	President Bruce Yannotti 960 NW 19T Avenue Pembroke Pines, FL 33029 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD ~~ERIE, FRITZ~~ ~~14910 NW 9TH DRIVE~~ ~~PEMBROKE PINES FL 33029~~	☒ Delete	TITLE / NAME VPD / STREET ADDRESS / CITY-ST-ZIP	VICE PRESIDENT Don Kaplan 19825 NW 10 Street Pembroke Pines FL 33029 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (10/02)

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: Brenda Feria REQUIRED Brenda Feria 1/31/02 9544501660
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #