

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 08, 2002 8:00 am
Secretary of State

0038511

04-08-2002 90242 010 ****70.00

DOCUMENT # N94000005575

1. Entity Name

LAUREL ESTATES PROPERTY OWNERS' ASSOCIATION, INC

Principal Place of Business

Mailing Address

21045 COMMERCIAL TRAIL
 BOCA RATON FL 33486
 US

21045 COMMERCIAL TRAIL
 200
 BOCA RATON FL 33486
 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

65-0604708

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WILLIAM K. ISAACSON ,
 C/O LANG MANAGEMENT COMPANY, INC.
 21045 COMMERCIAL TRAIL
 BOCA RATON FL 33486-1006**

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

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	P	<input type="checkbox"/> Delete
NAME	LERNER, BERNARD	
STREET ADDRESS	10565 LAUREL ESTATES LANE	
CITY-ST-ZIP	LAKE WORTH FL 33467	
TITLE	VP	<input type="checkbox"/> Delete
NAME	LESTER, WILLIAM	
STREET ADDRESS	10553 LAUREL ESTATES LANE	
CITY-ST-ZIP	LAKE WORTH FL 33467	
TITLE	ST	<input type="checkbox"/> Delete
NAME	LEVIN, ROBERT	
STREET ADDRESS	4067 LAUREL ESTATES WAY	
CITY-ST-ZIP	LAKE WORTH FL 33467	
TITLE	D	<input type="checkbox"/> Delete
NAME	LANDAU, MICHAEL	
STREET ADDRESS	4115 LAUREL ESTATES LANE	
CITY-ST-ZIP	LAKE WORTH FL 33467	
TITLE	D	<input type="checkbox"/> Delete
NAME	TANNENBAUM, BERNARD	
STREET ADDRESS	10541 LAUREL ESTATES WAY	
CITY-ST-ZIP	LAKE WORTH FL 33467	
TITLE	D	<input type="checkbox"/> Delete
NAME	MATER, STANLEY	
STREET ADDRESS	10535 LAUREL ESTATES LANE	
CITY-ST-ZIP	LAKE WORTH FL 33467	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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:

Bernard Tannenbaum
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)