

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2000 8:00 am
Secretary of State

05-23-2000 90214 014 ****61.25

DOCUMENT # N95000000734

1. Entity Name

HOMEOWNERS' ASSOCIATION OF EAGLE POINT, INC.

Principal Place of Business

Mailing Address

S AND A PROPERTY MANAGEMENT, INC.
 P.O. BOX 7179
 DELRAY BEACH FL 33482-7179

S AND A PROPERTY MANAGEMENT, INC.
 P.O. BOX 7179
 DELRAY BEACH FL 33482-7179

2. Principal Place of Business

3. Mailing Address

27664 Eagle Pointe Dr.

500 N.E. Spanish River Blvd

Suite, Apt. #, etc.

Suite #18

City & State

Delray Bch, Fl.

City & State

Boca Raton, Fl.

4. FEI Number

65-0646131

Applied For

Not Applicable

Zip
33446

Country
USA

Zip
33431

Country
USA

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

S AND A PROPERTY MANAGEMENT, INC.
 7644 EAGLE POINT DRIVE
 DELRAY BEACH FL 33446

Name

Ernest W. Willis

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

500 NE. Spanish River Blvd

Suite #18

City


Boca Raton,

FL

Zip Code
33431

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 Ernest W. Willis



April 6/00

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 PD Delete
 NAME BRADSHAW, LINDA
 STREET ADDRESS 7619 EAGLE POINT DR.
 CITY-ST-ZIP DELRAY BEACH FL 33446

TITLE PD Change Addition
 NAME Marcia Gerstenberg
 STREET ADDRESS 7552 Eagle Point Dr. #33
 CITY-ST-ZIP Delray Bch, Fl. 33446

TITLE VD Delete
 NAME GOLUB, JACK
 STREET ADDRESS 7603 EAGLE POINT DR.
 CITY-ST-ZIP DELRAY BEACH FL 33446

TITLE VD Change Addition
 NAME Doron Corcos
 STREET ADDRESS 7636 Eagle Point Dr. #23
 CITY-ST-ZIP Delray Beach, Fl. 33446

TITLE SD Delete
 NAME KEATS, MICHELLE
 STREET ADDRESS 7556 EAGLE POINT DR.
 CITY-ST-ZIP DELRAY BCH FL 33446

TITLE SD Change Addition
 NAME Charles Fleming
 STREET ADDRESS 7616 Eagle Point Dr. Delray Beach, Fl.
 CITY-ST-ZIP 33446

TITLE TD Delete
 NAME CORCOS, DORON
 STREET ADDRESS 7636 EAGLE POINT DR
 CITY-ST-ZIP DELRAY BCH FL 33446

TITLE TD Change Addition
 NAME John Speck
 STREET ADDRESS 7612 Eagle Point Dr. Delray Beach, Fl.
 CITY-ST-ZIP 33446

TITLE D Delete
 NAME MONTAGUE, ANDREW
 STREET ADDRESS 7668 EAGLE POINT DR.
 CITY-ST-ZIP DELRAY BCH FL 33446

TITLE Change Addition

TITLE D Delete
 NAME AMBRICO, SALVATORE
 STREET ADDRESS 7599 EAGLE POINT DR.
 CITY-ST-ZIP DELRAY BCH FL 33446

TITLE Change Addition

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:

Marcia Gerstenberg, President
SIGNATURE REQUIRED

4/6/00 561-638-8793

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)