

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000005356

1. Entity Name

WEITZER AT DEERFIELD BEACH HOMEOWNERS ASSOCIATIO

FILED
Apr 18, 2000 8:00 am
Secretary of State

04-18-2000 90161 016 ****61.25

Principal Place of Business

3300 UNIVERSITY DR
#405
CORAL SPRINGS FL 33065
US

Mailing Address

3300 UNIVERSITY DR
#405
CORAL SPRINGS FL 33065-4130
US

2. Principal Place of Business

THE CONTINENTAL GROUP

3. Mailing Address

THE CONTINENTAL GROUP

Suite, Apt. #, etc.

1067 SHOTGUN ROAD

Suite, Apt. #, etc.

1067 SHOTGUN ROAD

City & State

SUNRISE, FLA.

City & State

SUNRISE, FLA.

Zip

33326

Country

U.S.

Zip

33326

Country

U.S.

4. FEI Number

65-0630359

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

UNITED COMMUNITY MGMT CORP
3300 UNIVERSITY DR #405
CORAL SPRINGS FL 33065

7. Name and Address of New Registered Agent

Name

THE CONTINENTAL GROUP, LTD.

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

1067 SHOTGUN ROAD

SUNRISE, FLA.

City

SUNRISE

FL

Zip Code

33326

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

Brenda Akins Vice President of The Continental Group, Ltd. 4/7/00

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

TITLE PD
NAME NUNES, DAVID ☒ Delete
STREET ADDRESS 4282 NW 1 DR
CITY-ST-ZIP DEERFIELD BCH FL 33442

TITLE VP
NAME MCQUESTAN, ☒ Delete
STREET ADDRESS 4331 NW A PL
CITY-ST-ZIP DEERFIELD BCH FL 33442

TITLE TD
NAME BAKER, GAIL ☐ Delete
STREET ADDRESS 59 NW 44 TERR
CITY-ST-ZIP DEERFIELD BCH FL 33442

TITLE VP
NAME JOHNSTON, PATRICE M ☒ Delete
STREET ADDRESS 5901 NW 151 STREET, STE. 120
CITY-ST-ZIP MIAMI LAKES FL

TITLE D
NAME SZESNET, JOHN ☒ Delete
STREET ADDRESS 4226 NW 1 PL
CITY-ST-ZIP DEERFIELD BCH FL 33442

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Change ☐ Addition
NAME MC QUESTEN, JOANNE
STREET ADDRESS 4331 N.W. 1 PLACE
CITY-ST-ZIP DEERFIELD BCH, FL. 33442

TITLE VP ☐ Change ☒ Addition
NAME MORONEY, TRACY
STREET ADDRESS 4324 N.W. 1 DRIVE
CITY-ST-ZIP DEERFIELD BCH., FL. 33442

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD ☐ Change ☒ Addition
NAME O'DONNELL, PETER
STREET ADDRESS 4285 N.W. 1 DRIVE
CITY-ST-ZIP DEERFIELD BCH., FL. 33442

TITLE D ☐ Change ☒ Addition
NAME COEN, ROBERT
STREET ADDRESS 4291 N.W. 1 DRIVE
CITY-ST-ZIP DEERFIELD BCH., FL. 33442

TITLE ☐ Change ☐ 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:

Sanjiv Bhatnagar (Treasurer of HOA)

4/7/00

(954) 418-8334

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)