2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 05, 2001 8:00 am
Secretary of State
05-15-2001 90180 014 ****61.25

DOCUMENT # N95000005356

1. Entity Name

WEITZER AT DEERFIELD BEACH HOMEOWNERS ASSOCIATIO

Principal Place of Business	Mailing Address
THE CONTINENTAL GROUP 1067 SHOTGUN ROAD SUNRISE FL 33326 US	THE CONTINENTAL GROUP 1067 SHOTGUN ROAD SUNRISE FL 33326 US

DO NOT WRITE IN THIS SPACE

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 65-0630359 ☐ 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
THE CONTINENTAL GROUP LTD 1067 SHOTGUN ROAD SUNRISE FL 33326	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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MCQUESTEN, JOANNE 4331 NW 1 PLACE DEERFIELD BEACH FL 33442	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Sarah martin 4309 NW1 DRIVE DEERFIELD BCH, FL 33442 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MORONEY, TRACY 4324 NW 1 DRIVE DEERFIELD BEACH FL 33442	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD JORDAN Nedell 4267 NW 1 DRIVE DEERFIELD Bch, FL 33442 ☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD BAKER, GAIL 59 NW 44 TERR DEERFIELD BCH FL 33442	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP BOB Hermes 4303 NW 1 DRIVE DEERFIELD BCH, 33442 ☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD O'DONNELL, PETER 4285 NW 1 DRIVE DEERFIELD BEACH FL 33442	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BOB Stephans 89 NW 44 Terrace 33442 Deerfield Bch, FL ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D COEN, ROBERT 4291 NW 1 DRIVE DEERFIELD BCH FL 33442	☑ 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 (10/00)

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 Tracy Moroney President 6/6/01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #