

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2008 8:00 am
Secretary of State

04-17-2008 90019 006 ****61.25

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1. Entity Name
BREAKERS POINTE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
**1799 BREAKERS POINTE WAY
WEST PALM BEACH, FL 33411 US**

Mailing Address
**3461 B FAIRLANE FARMS RD
WEST PALM BEACH, FL 33414 US**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01142008 Chg-NP CR2E037 (12/06)

4. FEI Number
65-0635328

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**JOHN NEWSOME WELLINGTON MGMT
3461 -B FAIRLANE FARMS RD
WELLINGTON, FL 33414**

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

**Filing Fee is \$61.25
Due by May 1, 2008**

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

TITLE PD ☒ Delete
NAME KAPLAN, COLMAN
STREET ADDRESS 1784 BREAKERS POINTE WAY
CITY-ST-ZIP WEST PALM BEACH, FL 33411

TITLE TD ☒ Delete
NAME POIRIER, ISABELLA
STREET ADDRESS 1799 BREAKERS POINTE WAY
CITY-ST-ZIP WEST PALM BEACH, FL 33411

TITLE D ☒ Delete
NAME GOLDSTEIN, JEROME
STREET ADDRESS 112 S OLFORD AVE #304
CITY-ST-ZIP VENTNOR CITY, NJ 08406

TITLE VD ☒ Delete
NAME LUBIN, SYBIL
STREET ADDRESS 1854 BREAKERS POINTE WAY
CITY-ST-ZIP WEST PALM BEACH, FL 33411

TITLE SD ☒ Delete
NAME WAYNIK, CYRIL
STREET ADDRESS 1756 BREAKERS POINTE WAY
CITY-ST-ZIP WEST PALM BEACH, FL 33411

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE President ☐ Change ☒ Addition
NAME Larry Garfinkel
STREET ADDRESS 1785 Breaker Pointe way
CITY-ST-ZIP West Palm Beach, FL 33411

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

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

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

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 exemptions contained in Chapter 119, 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

LARRY GARFINKEL - PRESIDENT 4.10.08 561.793.2129

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #