

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91881 037 ****61.25

DOCUMENT # N96000002712

1. Entity Name
POINCIANA PARK CIVIC ASSOCIATION INC.



Principal Place of Business
**301 N.E. 23 STREET
FORT LAUDERDALE FL 33316**

Mailing Address
**P.O. BOX 22008
FORT LAUDERDALE FL 33335-2008**



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business
312 SE 23 Street, B

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Fort Lauderdale, FL

City & State

4. FEI Number **65-0341987**

Applied For
Not Applicable

Zip

33316

Country

USA

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**VILLANI, DAN
1400 SOUTH FEDERAL HIGHWAY
FORT LAUDERDALE FL 33316**

7. Name and Address of New Registered Agent

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

FILE NOW: FEE IS \$61.25

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 **P** ☐ Delete
NAME **VILLANI, DAN**
STREET ADDRESS **1408 SOUTH FEDERAL HIGHWAY**
CITY-ST-ZIP **FT. LAUDERDALE FL 33316**

TITLE **VP** ☐ Delete
NAME **GLOECKNER, KARL**
STREET ADDRESS **101 S.E. 19 STREET**
CITY-ST-ZIP **FORT LAUDERDALE FL 33316**

TITLE **S** ☐ Delete
NAME **MEISTER, JAN**
STREET ADDRESS **312 S.E. 23 STREET, B**
CITY-ST-ZIP **FORT LAUDERDALE FL 33316**

TITLE **T** ☐ Delete
NAME **GLOEXNER, SUSAN**
STREET ADDRESS **100 S.E. 19 STREET**
CITY-ST-ZIP **FT LAUDERDALE FL 33311**

TITLE **D** ☐ Delete
NAME **BAIR, JUDY**
STREET ADDRESS **304 S.E. 23 STREET**
CITY-ST-ZIP **FT LAUDERDALE FL 33316**

TITLE **D** ☐ Delete
NAME **GAGLIANO, RUSS**
STREET ADDRESS **1527 S.W. 1ST AVE**
CITY-ST-ZIP **FT LAUDERDALE FL 33316**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **VP** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **P** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☒ Change ☐ Addition
NAME **SUSAN GLOECKNER**
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 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** *Susan N. Gloeckner, Treasurer*

4/21/03

CR2E037 (10/02)