

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

FILED

02 MAY 30 PM 2:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N9600.0006247

1. Entity Name

Vanderbilt Estates Property Owners Association, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Miami Management, Inc.

3. Mailing Address

1189 Sawgrass Corp. Pkwy

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Surprise, FL

City & State

Surprise, FL

Zip

33323

Country

Broward

Zip

33323

Country

Broward

4. FEI Number

03/16/01 90043 022 6125
65-0743903

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Katzman & Korr

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

5581 W. Oakland Park Blvd.

2nd Floor

City

Landerhill

FL

Zip Code

33313

**DO NOT WRITE
IN THIS SPACE**

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 date if applicable.

Leigh C. Katzman Esq.

(NOTE: Registered Agent signature required when reinstating)

4/10/02
DATE

FEE IS \$61.25

Initial or Amended UBR

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	NAME	STREET ADDRESS	CITY-ST-ZIP
TD President	Leonard Peel	10660 PWSB CT	Coral Springs, FL 33076
TD Vice President	Bob Bilsker	5645 NW 108 Terrace	Coral Springs, FL 33076
TD Secretary	Gayle Cafferty	5636 NW 108 Way	Coral Springs, FL 33076
TD Treasurer	Gary Fixelle	5632 NW 108 Terrace	Coral Springs, FL 33076
D Director	Gregory Graham	5652 NW 108 Way	Coral Springs, FL 33076

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP

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DO NOT WRITE
*****61.25 *****61.25

CR2E037B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature]