

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 17, 2001 8:00 am
Secretary of State

08-17-2001 90003 002 ****61.25

0051623

DOCUMENT # N98000005793

1. Entity Name

BRIGHTON AT WELLINGTON'S EDGE PROPERTY OWNERS' A

Principal Place of Business

% GLEN MANAGEMENT SERVICES
 301 W CAMINO GARDENS BLVD #200
 BOCA RATON FL 33432

Mailing Address

% GLEN MANAGEMENT SERVICES
 P O BOX 1390
 BOCA RATON FL 33429

00001733



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

10851 W. Forest Hill Blvd
 Suite, Apt. #, etc.

3. Mailing Address

10851 W. Forest Hill Blvd
 Suite, Apt. #, etc.

City & State

Wellington FL

Zip

33414

Country

P.B.C.

City & State

Wellington - FL.

Zip

33414

Country

P.B.C.

4. FEI Number

65-0877905

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

GLEN, ANDREW C
 %GLEN MANAGEMENT SERVICES, INC.
 361 W CAMINO GARDENS BLVD STE 200
 BOCA RATON FL 33432

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.

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

TITLE PDSD
 NAME SCHULTZ, STANLEY ✓OK.
 STREET ADDRESS 301 W CAMINO GARDENS BLVD #200
 CITY-ST-ZIP BOCA RATON FL 33432 ☐ Delete

TITLE VPD
 NAME BELSON, VICTOR
 STREET ADDRESS 301 W CAMINO GARDENS BLVD #200
 CITY-ST-ZIP BOCA RATON FL 33432 ☐ Delete

TITLE TD
 NAME LEVINE, ALAN J
 STREET ADDRESS 301 W CAMINO GARDENS BLVD #200
 CITY-ST-ZIP BOCA RATON FL 33432 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
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 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
 NAME
 STREET ADDRESS 10851 W. Forest Hill Blvd
 CITY-ST-ZIP WELLINGTON - FL. 33414 ☒ Change ☐ Addition

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

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

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

TITLE
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 CITY-ST-ZIP ☐ Change ☐ Addition

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

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: STANLEY SCHULTZ, President. 8-14-01 561-790-6744

CR2E037 (10/00)