

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

FILED

02 NOV 14 PM 2:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N98000005908**
1. Entity Name
Villa Boshese Homeowners Association, Inc.

DO NOT WRITE IN THIS SPACE

REINSTATEMENT 02

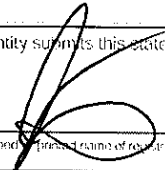
2. Principal Place of Business
6750 Via Villa Boshese
Suite, Apt. #, etc.
Delray Beach, FL
City & State
Zip **33446** Country **USA**

3. Mailing Address
Same
Suite, Apt. #, etc.
Same
City & State
Zip Country

10-14-02 01024 007 \$61.25
DO NOT WRITE IN THIS SPACE
05-17-02 90036 006 \$61.25
4. FEI Number **65-1007304**
Applied For
Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent
Name **Joshua Gersting Esq.**
Street Address (P.O. Box Number is Not Acceptable)
150 N. Federal Highway
Suite 300
City **Boca Raton, FL** Zip **33432**

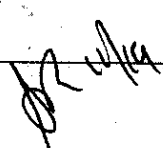
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida
SIGNATURE  **Joshua Gersting Esq.** DATE **10/7/02**
Signature, typed or printed name of registered agent, and date if applicable. (NOTE: Registered Agent signatures required when reinstating)

**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 | Stuart Diamond 6750 Via Villa Boshese Delray Beach, FL 33446 President Director | TITLE NAME STREET ADDRESS CITY-ST-ZIP | 300008353603 11/22/02--01092--021 **113.75 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Amos... Hernan Solter 6750 Via Villa Boshese Delray Beach, FL 33446 Director | TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Jessy Ausbach 6750 Via Villa Boshese Delray Beach, FL 33446 Treasurer Director | TITLE NAME STREET ADDRESS CITY-ST-ZIP | DO NOT WRITE IN THIS SPACE |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Martin Greeninger 6750 Via Villa Boshese Delray Beach, FL 33446 Vice President Director | TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Charles Friedman 6750 Via Villa Boshese Delray Beach, FL 33446 Treasurer Director | TITLE NAME STREET ADDRESS CITY-ST-ZIP |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Cheryl Reichert 6750 Via Villa Boshese Delray Beach, FL 33446 Secretary Director | TITLE 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 on an attachment with an address, with all other like empowered.

SIGNATURE  **Stuart Diamond** DATE **10/7/02** (561) 499-4139
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037B (12/01)