

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2000 8:00 am
Secretary of State

03-06-2000 90057 045 ****61.25

DOCUMENT # N98000007305

1. Entity Name

DORAL GARDENS HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business

Mailing Address

C/O CMC MANAGEMENT ATTN: PAUL VALYO
 22151 SHOREWIND DRIVE
 BOCA RATON FL 33428

C/O CMC MANAGEMENT ATTN: PAUL VALYO
 22151 SHOREWIND DRIVE
 BOCA RATON FL 33428-4707

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0887316

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

VALYO, PAUL
C/O CMC MANAGEMENT
22151 SHOREWIND DRIVE
BOCA RATON FL 33428

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** Delete
 NAME **HAMMOND, LEONA**
 STREET ADDRESS **2541 METROCENTER BLVD. SUITE 1**
 CITY-ST-ZIP **WEST PALM BEACH FL**

TITLE **D** Change Addition
 NAME **Borkenhagen, Kevin**
 STREET ADDRESS **8198 Jog Road, Suite 200**
 CITY-ST-ZIP **Boynton Beach, Florida 33437**

TITLE **D** Delete
 NAME **BRAZIL, BILL**
 STREET ADDRESS **2541 METROCENTER BLVD. SUITE 1**
 CITY-ST-ZIP **WEST PALM BEACH FL**

TITLE **D** Change Addition
 NAME **Borkenhagen, Kevin**
 STREET ADDRESS **8198 Jog Road, Suite 200**
 CITY-ST-ZIP **Boynton Beach, Florida 33437**

TITLE **D** Delete
 NAME **SEITMAN, IVY**
 STREET ADDRESS **2541 METROCENTER BLVD. SUITE 1**
 CITY-ST-ZIP **WEST PALM BEACH FL**

TITLE **D** Change Addition
 NAME **Borkenhagen, Kevin**
 STREET ADDRESS **8198 Jog Road, Suite 200**
 CITY-ST-ZIP **Boynton Beach, Florida 33437**

TITLE Delete
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 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: Paul M. Seitman **2/4/00** **561-536-1000**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #