

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

FILED
Jun 16, 2003 8:00 am
Secretary of State

04-28-2003 90975 039 ****61.25

DOCUMENT # N99000003422

1. Entity Name

IN THE PINES HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

11555 HERON BAY BLVD
SUITE 200
CORAL SPRINGS FL 33076

11555 HERON BAY BLVD
SUITE 200
CORAL SPRINGS FL 33076

2. Principal Place of Business

3. Mailing Address

4780 N. STATE RD 7

4780 N. STATE RD 7

Suite, Apt. #, etc.

Suite, Apt. #, etc.

E-250

E-250

City & State

City & State

LAUDERDALE, FL.

LAUDERDALE LAKES, FL

Zip

Country

Zip

Country

33319

USA

33319

USA

6. Name and Address of Current Registered Agent

WAROFF, MICHAEL PA
11555 HERON BAY BLVD
SUITE 200
CORAL SPRINGS FL 33076

7. Name and Address of New Registered Agent

Name: PHOENIX MANAGEMENT
Street Address (P.O. Box Number is Not Acceptable): 4780 N. STATE RD 7 #E-250
City: LAUDERDALE LAKES
FL Zip Code: 33319

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

Sheldon Goldberg

Sheldon Goldberg

4/25/03

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: D/VP
NAME: ROTHENBERG, MARK D
STREET ADDRESS: 11555 HERON BAY BLVD
CITY-ST-ZIP: CORAL SPRINGS FL 33076

TITLE: D/VP
NAME: ROTHENBERG, MARK D
STREET ADDRESS: 8888 Pinebrook
CITY-ST-ZIP: Parkland, FL 33067

TITLE: D/P
NAME: Fish, Robert
STREET ADDRESS: 5946 PINEWOOD
CITY-ST-ZIP: Parkland, FL 33067

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: D/P
NAME: Morris, Stuart
STREET ADDRESS: 5966 PINEWOOD
CITY-ST-ZIP: Parkland, FL 33067

TITLE:
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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: *Sheldon Goldberg*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/03

Date

Daytime Phone #

CR2E037 (10/02)