

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Mar 01, 2001 8:00 am
Secretary of State

03-01-2001 90047 042 ****61.25

DOCUMENT # N99000005072

1. Entity Name

COUNTRY GLEN AT RIVERMILL HOMEOWNERS' ASSOCIATIO

Principal Place of Business

**7100 W CAMINO REAL
#117
BOCA RATON FL 33433**

Mailing Address

**7100 W CAMINO REAL
#117
BOCA RATON FL 33433**

00020303



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-1006505

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CENTEX REAL ESTATE CORPORATION
8198 JOG ROAD STE 200
BOYNTON BEACH FL 33437**

7. Name and Address of New Registered Agent

Name

Paul Valyo

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

7100 W Camino Real #117

City

Boca Raton

FL

Zip Code

33433

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]

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 **PD** ☐ Delete
NAME **ABRAMS, DAVE**
STREET ADDRESS **8198 JOG ROAD STE 200**
CITY-ST-ZIP **BOYNTON BEACH FL 33437**

TITLE **VD** ☐ Delete
NAME **BORKENHAGEN, KEVIN**
STREET ADDRESS **8198 JOG ROAD STE 200**
CITY-ST-ZIP **BOYNTON BEACH FL 33437**

TITLE **STD** ☒ Delete
NAME **BOMHOFF, JENNIFER**
STREET ADDRESS **8198 JOG ROAD STE 200**
CITY-ST-ZIP **BOYNTON BEACH FL 33437**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE **STD** ☐ Change ☒ Addition
NAME **Paulsen, Candice**
STREET ADDRESS **8198 Jog Rd Ste 200**
CITY-ST-ZIP **Boynton Beach FL 33437**

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

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

TITLE ☐ Change ☐ Addition
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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]

Candice Paulsen

2/20/01

561-536-1000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)