

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 12, 2000 8:00 am
Secretary of State
 05-12-2000 90078 021 ***150.00

DOCUMENT # P96000051950

1. Entity Name

BROOKMAN-FELS AT COUNTRY CLUB ESTATES, INC.

Principal Place of Business

Mailing Address

940 HARBOR ISLANDS DR
 HOLLYWOOD FL 33019
 US

940 HARBOE ISLANDS DR
 G-9
 HOLLYWOOD FL 33019
 US

044100



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

940 HARBOR ISLANDS DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
 HOLLYWOOD FL

4. FEI Number

65-0685044

Applied For

Not Applicable

Zip

Country

Zip

33019

Country

US

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SAVAGE, CRAIG D
 801 N.E. 167TH STREET
 SUITE 302
 NORTH MIAMI FL 33162

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

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
 NAME SD
 STREET ADDRESS LEVY, MICHAEL
 CITY-ST-ZIP 940 HARBOR ISLANDS DR
 HOLLYWOOD FL 33019

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

TITLE ☐ Delete
 NAME PD
 STREET ADDRESS FELS, JON
 CITY-ST-ZIP 940 HARBOR ISLANDS DR
 HOLLYWOOD FL 33019

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

TITLE ☐ Delete
 NAME VD
 STREET ADDRESS OFFENBERG, BERNARD
 CITY-ST-ZIP 940 HARBOR ISLANDS DR
 HOLLYWOOD FL 33019

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

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

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other life empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BERNARD OFFENBERG

4/26/00 (954) 454-1996

Date

Daytime Phone #

CR2E034 (9/99)