

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S82006

1. Entity Name

THE BROOKFIELD COMPANY OF BOCA RATON

FILED

Jan 28, 2000 8:00 am
Secretary of State

01-28-2000 90127 023 ***158.75

Principal Place of Business

Mailing Address

1723 AVENDIA DEL SOL
BOCA RATON FL 33432
US

PO BOX 812169
BOCA RATON FL 33481-2169
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0298028

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

7. Name and Address of New Registered Agent

ACKER, JESSICA L
7664 NW 70TH WAY
SUITE 400
PARKLAND FL 33067

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 VPDT
NAME ACKER, JESSICA L.
STREET ADDRESS 7664 NW 70TH WAY
CITY-ST-ZIP PARKLAND FL 33067 ☒ Delete

TITLE VPDT
NAME Linchan, Jessica
STREET ADDRESS 7664 NW 70 Way
CITY-ST-ZIP Parkland, FL 33067 ☒ Change ☐ Addition

TITLE VPDS
NAME LINEHAN, REBECCA
STREET ADDRESS 7780 KENWAY PLACE WEST
CITY-ST-ZIP BOCA RATON FL 33433 ☐ Delete

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

TITLE D
NAME LINEHAN, JANET M
STREET ADDRESS 801 W WASHINGTON PO BOX 2278
CITY-ST-ZIP MIDDLEBURG VA 20118 ☐ Delete

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

TITLE P
NAME TAYLOR, GAY W
STREET ADDRESS 4900 MANGO BLVD
CITY-ST-ZIP WEST PALM BCH FL 33411 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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 like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/09/00 561 998-9400