

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 17, 2004 8:00 am
Secretary of State

02-17-2004 90008 047 ****61.25

DOCUMENT # 709465

1. Entity Name

BOCA RIO GOLF CLUB, INC.



Principal Place of Business

22041 BOCA RIO ROAD
 BOCA RATON FL 33433

Mailing Address

22041 BOCA RIO ROAD
 BOCA RATON FL 33433

54007154



MOORE CR2E037 (11/03)

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-1101673

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HRAWG CORP.
 1801 N MILITARY TRAIL, SUITE 200
 BOCA RATON FL 33431

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

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
Due By May 1, 2004

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

TITLE	PD PD	<input type="checkbox"/> Delete
NAME	TAUB, MELVIN	
STREET ADDRESS	120 SE 5TH AVE	
CITY - ST - ZIP	BOCA RATON FL	
TITLE	AS	<input type="checkbox"/> Delete
NAME	NELSON, M E	
STREET ADDRESS	12155 NW 30TH ST	
CITY - ST - ZIP	CORAL SPRINGS, FL 00000	
TITLE	TD	<input type="checkbox"/> Delete
NAME	BUBES, DAVID	
STREET ADDRESS	4550 N. PARK AVE	
CITY - ST - ZIP	BOCA RATON FL	
TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	ADLER, ROBERT P	
STREET ADDRESS	2385 N.W. 46TH ST..	
CITY - ST - ZIP	BOCA RATON FL	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	BERMAN, PHILIP	
STREET ADDRESS	1400 S OCEAN BLVD	
CITY - ST - ZIP	BOCA RATON FL 33432	
TITLE	SD	<input type="checkbox"/> Delete
NAME	MEYERSON, ROBERT	
STREET ADDRESS	400 SE 5th Ave	
CITY - ST - ZIP	BOCA RATON, FL 33432	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MONROE MEYERSON	
STREET ADDRESS	7172 MANDARIN DL 306	
CITY - ST - ZIP	BOCA RATON, FL 33433	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> 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:

Mary E Nelson MARY E NELSON 2/10/04

Date

Daytime Phone #

561-482-3300