2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 17, 2005 8:00 am
Secretary of State
04-18-2005 90271 049 ****61.25

DOCUMENT # 714914

1. Entity Name
THE BOULEVARDS OF TAMARAC CIVIC ASSOCIATION, INC.

Principal Place of Business	Mailing Address
2611 NORTHWEST 53RD STREET TAMARAC, FL 33309 mailing address	~~MLM PROPERTY MGMT. CORP.~~ ~~PO BOX 771006~~ ~~CORAL SPRINGS, FL 33077 US~~

66017535

03292005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
23-7023607
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

~~SOLOMAN, MICHAEL A~~
~~C/O MLM PROPERTY MGMT~~
~~9900 W SAMPLE RD STE 300~~
~~CORAL SPRINGS, FL 33065~~
Blvd of Tamarac
2611 NW 53 ST
Tamarac, Fl.

DO NOT WRITE IN THIS SPACE

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 Barbara Meillarec 5-10-05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	~~TD~~ VPD Harry Flores
NAME	~~MOSHER, J.D.~~
STREET ADDRESS	~~2301 NW 55TH ST~~ 5402 NW 95 TERR
CITY-ST-ZIP	~~TAMARAC, FL 33309~~ Tamarac Fl. 33309
TITLE	~~VPD~~ P.D
NAME	MEILLAREC, BARBARA
STREET ADDRESS	2707 NW 55TH ST
CITY-ST-ZIP	TAMARAC, FL 33309
TITLE	TD
NAME	~~WEILERSTEIN, ANDY~~ Steve McGonigle
STREET ADDRESS	~~5402 NW 27TH WAY~~ 2609 NW 54ST
CITY-ST-ZIP	~~TAMARAC, FL 33309~~ Tamarac Fl. 33309
TITLE	~~PD~~ D
NAME	STEINBERG, SUSAN
STREET ADDRESS	2506 NW 54TH ST.
CITY-ST-ZIP	FORT LAUDERDALE, FL 33309
TITLE	D
NAME	KIRKPATRICK, MARY
STREET ADDRESS	~~2705 NW 55TH ST~~ open
CITY-ST-ZIP	~~TAMARAC, FL 33309~~
TITLE	SD
NAME	BROWN, BETTY
STREET ADDRESS	~~5403 NW 27TH~~ AVE open
CITY-ST-ZIP	~~TAMARAC, FL~~ 33309

DO NOT WRITE IN THIS SPACE

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: Barbara Meillarec Barbara Meillarec 4/1/05 7311763
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #