

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 04, 2001 8:00 am**  
**Secretary of State**

0052834

**DOCUMENT # 721176**

1. Entity Name

**BOCA REEF ASSOCIATION, INC.**

04-04-2001 90050 020 \*\*\*\*61.25

Principal Place of Business

Mailing Address

**3051 S. OCEAN BLVD.  
 BOCA RATON FL 33432**

**1215 E HILLSBORO BLVD  
 DEERFIELD FL 33441  
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**59-1383226**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

**\$8.75** Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CAMPBELL PROPERTY/MR. BRUCE CAMPBELL  
 1233 E. HILLSBORO BLVD.  
 DEERFIELD BEACH FL 33441**

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

**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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP		TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
	<b>STD</b>			<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<b>MANWARINO, RUTH</b>	<b>3051 S OCEAN BLVD 207</b>	<b>BOCA RATON FL 33432</b>						
	<b>PD</b>			<input type="checkbox"/> Delete		<b>vice president</b>			<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
	<b>NICRO, JOAN</b>	<b>3051 S OCEAN BLVD 405</b>	<b>BOCA RATON FL</b>						
	<b>D</b>			<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<b>FERRO, JOHN</b>	<b>3051 S OCEAN BLVD, #108</b>	<b>BOCA RATON FL 33432</b>						
	<b>V</b>			<input type="checkbox"/> Delete		<b>President</b>			<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
	<b>MERRILL, ROBERT</b>	<b>3051 S OCEAN BLVD #407</b>	<b>BOCA RATON FL 33432</b>						
	<b>D</b>			<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<b>MACLENNAN, CHARLES</b>	<b>3051 S OCEAN BLVD #408</b>	<b>BOCA RATON FL 33432</b>						
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:** *Robert C. Merrill* **ROBERT C. MERRILL** 4/1/01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)