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CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 31 PM 3:24

DOCUMENT # **724365** (2)
1. Corporation Name
BOCA WEST MASTER ASSOCIATION, INC.

Principal Place of Business Mailing Address
20540 CNTRY CLUB BLVD #105 **20540 CNTRY CLUB BLVD #105**
BOCA RATON FL 33434 **BOCA RATON FL 33434**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **09/18/1972** 3a. Date of Last Report **03/29/1994**
4. FEI Number **59-1619611** Applied For
Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status **\$68.75 Supplemental Fee Not Required**
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent
RAYMOND, WILLIAM
20540 COUNTRY CLUB BLVD
SUITE 105
BOCA RATON FL 33434

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SHOTTLAND, JAMES	1.2 NAME	
STREET ADDRESS	19428 CEDAR GLEN DR	1.3 STREET ADDRESS	
CITY - ST - ZIP	BOCA RATON FL	1.4 CITY - ST - ZIP	
TITLE	TD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RAUSCH, GEORGE	2.2 NAME	
STREET ADDRESS	19712 BAY COVE DRIVE	2.3 STREET ADDRESS	
CITY - ST - ZIP	BOCA RATON, FL 00000	2.4 CITY - ST - ZIP	
TITLE	VP	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RAYMOND, WILLIAM	3.2 NAME	
STREET ADDRESS	20540 COUNTRY CLUB BLVD	3.3 STREET ADDRESS	
CITY - ST - ZIP	BOCA RATON, FL 00000	3.4 CITY - ST - ZIP	
TITLE	VPD	4.1 TITLE	PRESIDENT/DIRECTOR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FRIEDMAN, SANDRA	4.2 NAME	
STREET ADDRESS	19513 PLANTERS POINT DR	4.3 STREET ADDRESS	
CITY - ST - ZIP	BOCA RATON, FL 33433	4.4 CITY - ST - ZIP	
TITLE	D	5.1 TITLE	VICE PRES. /DIRECTOR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLODINGER, JACK	5.2 NAME	
STREET ADDRESS	2209 BRIDGEWOOD DR.	5.3 STREET ADDRESS	
CITY - ST - ZIP	BOCA RATON FL	5.4 CITY - ST - ZIP	
TITLE	SO	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROTHSCHILD, HENRY	6.2 NAME	
STREET ADDRESS	541 LAKESIDE BLVD	6.3 STREET ADDRESS	
CITY - ST - ZIP	BOCA RATON FL	6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Marilyn Pamer (407) 488-1598
Marilyn Pamer
Date: 3/20/95

724365

**ADDITION TO CORPORATION ANNUAL REPORT 1995
DOCUMENT #724365
BOCA WEST MASTER ASSOCIATION, INC.**

Title D
Name Jerry Kramer
Address 20540 Country Club Blvd., #105
City-St-Zip Boca Raton, FL 33434

Title D
Name Lawrence Sherman
Address 20540 Country Club Blvd., #105
City-St-Zip Boca Raton, FL 33434

Title ASST.SEC
Name Marilyn Pamer
Address 20540 Country Club Blvd., #105
City-St-Zip Boca Raton, FL 33434