

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

Mar 07, 2002 8:00 am
Secretary of State

03-07-2002 90042 012 ****61.25

DOCUMENT # 728649

1. Entity Name

BOCA PINAR CONDOMINIUM ASSN., INC.

Principal Place of Business

Mailing Address

%COMMUNITY ASSOCIATION SVCS., INC.
951 BROKEN SOUND PKY., N.W., STE. 250
BOCA RATON FL 33487-3531

%COMMUNITY ASSOCIATION SVCS., INC.
951 BROKEN SOUND PKY., N.W., STE. 250
BOCA RATON FL 33487-3531

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1654172

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

BUDD, GARY
951 BROKEN SOUND PARKWAY # 250
BOCA RATON FL 33487

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

Gary Budd Gary Budd

2/25/02

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 PD
NAME FRIEDMAN, DANIEL
STREET ADDRESS 4631 NW 2ND AVE #701
CITY-ST-ZIP BOCA RATON FL 33431 ☒ Delete

TITLE PD
NAME JILEO, JASON
STREET ADDRESS 4601 NW 2ND AVE., #807
CITY-ST-ZIP BOCA RATON, FL 33431 ☐ Change ☒ Addition

TITLE VD
NAME LYON, RAY
STREET ADDRESS 4761 NW 2ND AVE., #405
CITY-ST-ZIP BOCA RATON FL 33431 ☒ Delete

TITLE VPD
NAME HAMILL, KATHLEEN
STREET ADDRESS 4761 NW 2ND AVE., #311
CITY-ST-ZIP BOCA RATON, FL 33431 ☐ Change ☒ Addition

TITLE S
NAME MARINETTI, LISA
STREET ADDRESS 4601 NW 2ND AVE #811
CITY-ST-ZIP BOCA RATON FL 33431 ☒ Delete

TITLE SD
NAME HARRISON, ERIC
STREET ADDRESS 4761 NW 2ND AVE., #303
CITY-ST-ZIP BOCA RATON, FL 33431 ☐ Change ☒ Addition

TITLE TD
NAME ZEGERS, DENISE
STREET ADDRESS 4691 NW 2ND AVE #503
CITY-ST-ZIP BOCA RATON FL 33431 ☒ Delete

TITLE TD
NAME LANDY, LILA
STREET ADDRESS 4761 NW 2ND AVE., #301
CITY-ST-ZIP BOCA RATON, FL 33431 ☐ Change ☒ Addition

TITLE D
NAME PESCHEL, DEBBIE
STREET ADDRESS 4631 NW 2ND AVE #702
CITY-ST-ZIP BOCA RATON FL 33431 ☐ 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

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:

SIGNATURE REQUIRED

2/25/02 361-994-1784

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E037 (9/01)