2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2007
Secretary of State

DOCUMENT# 729569

Entity Name: BOCA VILLAGE ASSOCIATION, INC.

Current Principal Place of Business:

1599 NW 9 AVENUE
BOCA RATON, FL 33486

New Principal Place of Business:

Current Mailing Address:

1599 NW 9 AVENUE
BOCA RATON, FL 33486

New Mailing Address:

1599 NW 9 AVENUE
SUITE 2
BOCA RATON, FL 33486

FEI Number: 59-1626325 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROBERT KAYE ASSOCIATES,P.A.
6261 NW 6 WAY
SUITE 103
FORT LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: T ( ) Delete
Name: GRECO, PAUL
Address: 1149-01 NW 13 STREET
City-St-Zip: BOCA RATON, FL 33486 US

Title: VP ( ) Delete
Name: TECA, VIRGIL
Address: 1189-01 NW 13 STREET
City-St-Zip: BOCA RATON, FL 33486

Title: P ( ) Delete
Name: ERKMEN, LEVENT
Address: 1089 NW 13TH ST. UNIT #8
City-St-Zip: BOCA RATON, FL 33486

Title: S ( ) Delete
Name: LIGOCKI, TERRI
Address: 1069-2 NW 13TH ST
City-St-Zip: BOCA RATON, FL 33486

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: GRECO, PAUL
Address: 1149-01 NW 13 STREET
City-St-Zip: BOCA RATON, FL 33486 US

Title: VP (X) Change ( ) Addition
Name: ERKMEN, LEVENT
Address: 1089 -08 NW 13 STREET
City-St-Zip: BOCA RATON, FL 33486

Title: S (X) Change ( ) Addition
Name: SHAW, LAURA C
Address: 1169-03 NW 13 STREET
City-St-Zip: BOCA RATON, FL 33486

Title: D (X) Change ( ) Addition
Name: LIGOCKI, TERRI
Address: 1069-02 NW 13TH ST
City-St-Zip: BOCA RATON, FL 33486

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAUL GRECO P 04/11/2007

Electronic Signature of Signing Officer or Director — Date