

# FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1996**



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

**DOCUMENT # 738976 (0)**

1. Corporation Name

**THE FAIRWAYS OF BOCA LAGO CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business

Mailing Address

**9039 VISTA DEL LAGO  
BOCA RATON FL 33428**

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BOCA RATON FL 33428**

3. Date Incorporated or Qualified  
**05/09/1977**

3a. Date of Last Report  
**04/20/1995**

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

**59-1849337**

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

City & State

City & State

23

28

6. Election Campaign Financing  
Trust Fund Contribution

☐ **\$5.00 May Be Added to Fees**

Zip

Country

Zip

Country

24

25

29

30

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  
☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**KALISH, LESTER  
C/O BOCA LAGO MANAGEMENT  
9039 VISTA DEL LAGO  
BOCA RATON FL 33428**

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable.

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

DATE

12. OFFICERS AND DIRECTORS

TITLE **V** ☐ DELETE  
NAME **MALAMUTH, SOL**  
STREET ADDRESS **8535 CASA DEL LAGO**  
CITY-ST-ZIP **BOCA RATON FL**

TITLE **T** ☐ DELETE  
NAME **WINKLER, LILLIAN**  
STREET ADDRESS **8305 CASA DEL LAGO #38**  
CITY-ST-ZIP **BOCA RATON FL**

TITLE **P** ☐ DELETE  
NAME **KALISH, LESTER**  
STREET ADDRESS **21213 LAGO CIR #101**  
CITY-ST-ZIP **BOCA RATON FL**

TITLE **D** ☒ DELETE  
NAME **WALDMANN, JULIAN**  
STREET ADDRESS **8545 CASA DEL LAGO**  
CITY-ST-ZIP **BOCA RATON FL**

TITLE **S** ☒ DELETE  
NAME **LEONARD KANOFKY**  
STREET ADDRESS **8435 CASA DEL LAGO**  
CITY-ST-ZIP **BOCA RATON FL**

TITLE **D** ☒ DELETE  
NAME **HANDELSMAN, RHODA**  
STREET ADDRESS **21219 LAGO CIR #5C**  
CITY-ST-ZIP **BOCA RATON FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition  
12 NAME  
13 STREET ADDRESS  
14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition  
22 NAME  
23 STREET ADDRESS  
24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition  
32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIP

41 TITLE ☐ Change ☒ Addition  
42 NAME **S HARRIET ROSEN**  
43 STREET ADDRESS **8460 CASA DEL LAGO #25F**  
44 CITY-ST-ZIP **BOCA RATON, FL**

51 TITLE ☐ Change ☒ Addition  
52 NAME **D WEISS, GERALD**  
53 STREET ADDRESS **8410 CASA DEL LAGO #20L**  
54 CITY-ST-ZIP **BOCA RATON, FL**

61 TITLE ☐ Change ☒ Addition  
62 NAME **D ALPERT, EUGENE**  
63 STREET ADDRESS **8566 CASA DEL LAGO #47D**  
64 CITY-ST-ZIP **BOCA RATON, FL**

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 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**SOL MALAMUTH** 4/23/96 483-4000 (407)

Date

Daytime Phone #

CR2E037 (12/95)