


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2008 8:00 am
Secretary of State

04-21-2008 90082 029 ****61.25

DOCUMENT # 738976 1. Entity Name THE FAIRWAYS OF BOCA LAGO CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 9039 VISTA DEL LAGO BOCA RATON, FL 33428 US			Mailing Address 9039 VISTA DEL LAGO BOCA RATON, FL 33428 US		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip Country		City & State Zip Country		4. FEI Number 59-1849337	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent STEINER, NAT C/O BOCA LAGO MANAGEMENT 9039 VISTA DEL LAGO BOCA RATON, FL 33428			7. Name and Address of New Registered Agent 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD STEINER, NAT 8310 CASA DEL LAGO 1G BOCA RATON, FL	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD WEISS, GERALD 8410 CASA DEL LAGO 20L BOCA RATON, FL	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD SILBERMAN, ELAINE 8410 CASA DEL LAGO #20G BOCA RATON FL 33433
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LEVENTHAL, HERMAN 8315 CASA DEL LAGO #4D BOCA RATON, FL 33433	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD ZELEN, HERBERT 8305 CASA DEL LAGO 3H BOCA RATON, FL	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD SHARF, ARTHUR 8305 CASA DEL LAGO 3H BOCA RATON, FL	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FARBER, GERALD 21205 LAGO CIRCLE #143 BOCA RATON, FL 33433	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _____ NAT STEINER 4/10/08 (564) 483-4000 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

ATTACHMENT

40075046

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ENTITY NAME: FAIRWAYS OF BOCA LAGO CONDOMINIUM ASSOCIATION

DOCUMENT #738976

FEI #59-1849337

ADDITIONAL OFFICERS AND DIRECTORS

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Weinberger, Rhoda
8315 Casa Del Lago #4C
Boca Raton, FL 33433

SIGNATURE: _____

Signature of Signing Officer or Director

Date

4/10/08

(561) 483-4000

Daytime Phone #

TYPED OR PRINTED NAME OF SIGNING OFFICER: Nat Steiner