2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jul 17, 2007
Secretary of State

DOCUMENT# 740916

Entity Name: BOCA HILLS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

340 NW 19TH ST.
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

340 NW 19TH ST
UNIT 105
BOCA RATON, FL 33432

New Mailing Address:

400 S. FEDERAL HWY. C/O JOHN PORTER ACCT.
SUITE 404
BOYNTON BEACH, FL 33432

FEI Number: 59-1880360 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KAHN, HOWARD
4000 HOLLYWOOD BLVD
PRESIDENTIAL CIRCLE SUITE 400 N
HOLLYWOOD, FL 33021 US

Name and Address of New Registered Agent:

DEGANCE, JOSEPH ESQUIRE
3471 N. FEDERAL HWY.
SUITE 300
FT. LAUDERDALE, FL 33306 US

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: JOSEPH DEGANCE 07/17/2007
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: CHAPMAN, LEONARD
Address: 985 SW 3RD ST.
City-St-Zip: BOCA RATON, FL 33486

Title: VP ( ) Delete
Name: FOLGATE, JILL
Address: 340 NW 19TH ST UNIT 304
City-St-Zip: BOCA RATON, FL 33432

Title: ST ( ) Delete
Name: ASSANTES, MARY
Address: 1228 SW 4TH CT.
City-St-Zip: BOCA RATON, FL 33432

Title: D ( ) Delete
Name: MAIN, MARGO
Address: 340 NE 19TH ST
City-St-Zip: BOCA RATON, FL 33432

Title: D ( ) Delete
Name: LIGHTCAP, DOUGLAS
Address: 340 NW 19TH ST.
City-St-Zip: BOCA RATON, FL 33432

Title: D ( ) Delete
Name: PORTER, JOHN
Address: 1403 W. BOYNTON BEACH BLVD #9
City-St-Zip: BOYNTON BEACH, FL 33426

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JOHN PORTER D 07/17/2007
Electronic Signature of Signing Officer or Director — Date