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Feb 11 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 743210 (7)
1. Corporation Name
MONTOYA ESTATES HOMEOWNER'S ASSOCIATION, INC.

Principal Place of Business Mailing Address
7764 SAN MATEO DRIVE 7764 SAN MATEO DRIVE
BOCA RATON FL 33433 BOCA RATON FL 33433-4133



3. Date Incorporated or Qualified 06/12/1978 3a. Date of Last Report 03/06/1996

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		59-1845213		Not Applicable	
22 City & State		27 City & State		5. Certificate of Status Desired		☐ \$8.75 Additional Fee Required	
23 Zip		28 Country		6. Election Campaign Financing Trust Fund Contribution		☐ \$5.00 May Be Added to Fees	
24 Zip		25 Country		29 Zip		30 Country	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			

BECKER & POLIAKOFF, P.A.
500 AUSTRALIAN AVENUE SOUTH
9TH FLOOR
WEST PALM BEACH FL 33401

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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 reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VPD	1.1 TITLE	VPD
NAME	PACKER, BEN	1.2 NAME	Epstein, Milton
STREET ADDRESS	7675 CYPRESS CRESCENT	1.3 STREET ADDRESS	7905 Chula Vista Crescent
CITY-ST-ZIP	BOCA RATON FL	1.4 CITY-ST-ZIP	Boca Raton, Florida 33433
TITLE	DS	2.1 TITLE	D
NAME	BAND, CHANNON	2.2 NAME	Broadsky, Ellen
STREET ADDRESS	7674 CYPRESS CRESCENT	2.3 STREET ADDRESS	7881 San Marcos Place
CITY-ST-ZIP	BOCA RATON FL	2.4 CITY-ST-ZIP	Boca Raton, Florida 33433
TITLE	D	3.1 TITLE	DS
NAME	JASLOW, SHIRLEY	3.2 NAME	Jaslow, Shirley
STREET ADDRESS	7887 SAN MARCOS PLACE	3.3 STREET ADDRESS	7887 San Marcos Place
CITY-ST-ZIP	BOCA RATON FL	3.4 CITY-ST-ZIP	Boca Raton, Florida 33433
TITLE	PD	4.1 TITLE	
NAME	METZGER, JEROME	4.2 NAME	
STREET ADDRESS	7810 SAN MAREOS PLACE	4.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	D
NAME	COHEN, CAROL	5.2 NAME	Sherman, Richard
STREET ADDRESS	7655 SAN MATEO DRIVE	5.3 STREET ADDRESS	7977 Chula Vista Crescent
CITY-ST-ZIP	BOCA RATON FL	5.4 CITY-ST-ZIP	Boca Raton, Florida 33433
TITLE	DT	6.1 TITLE	
NAME	FREADLIN, JOSEPH C	6.2 NAME	
STREET ADDRESS	7719 CYPRESS CRESCENT	6.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	6.4 CITY-ST-ZIP	

14. I do 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 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.

CR2E037 (9/96)