

**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Apr 21, 2004 8:00 am
Secretary of State

04-21-2004 90067 005 ****61.25

DOCUMENT # 743210
1. Entity Name
MONTOYA ESTATES HOMEOWNER'S ASSOCIATION, INC.



Principal Place of Business: **7764 SAN MATEO DRIVE BOCA RATON FL 33433**
Mailing Address: **7764 SAN MATEO DRIVE BOCA RATON FL 33433**

2. Principal Place of Business: Suite, Apt. #, etc.
3. Mailing Address: Suite, Apt. #, etc.

City & State: Zip Country



MOORE CR2E037 (11/03)

4. FEI Number: **59-1845213**
Applied For: Not Applicable
5. Certificate of Status Desired: **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
BECKER & POLIAKOFF, P.A.
500 AUSTRALIAN AVENUE SOUTH
9TH FLOOR
WEST PALM BEACH FL 33401

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: _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE: _____

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing Trust Fund Contribution: **\$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	VP	<input type="checkbox"/> Delete
NAME	EISENBERG, MURRAY D	
STREET ADDRESS	7959 CHULA VISTA CRESCENT	
CITY-ST-ZIP	BOCA RATON FL 33433	
TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	LURIE, DEENA	
STREET ADDRESS	7489 MALIBU CRESCENT	
CITY-ST-ZIP	BOCA RATON FL 33433	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	GOLDBERG, RALPH	
STREET ADDRESS	7960 CHULA VISTA CRESCENT	
CITY-ST-ZIP	BOCA RATON FL 33433	
TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	BROIDE, JOSHUA	
STREET ADDRESS	7725 SAN MATEO DRIVE	
CITY-ST-ZIP	BOCA RATON FL 33433	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	SCHWERTZ, HENRY	
STREET ADDRESS	7965 CHULA VISTA CRESCENT	
CITY-ST-ZIP	BOCA RATON FL 33433	
TITLE	DT	<input checked="" type="checkbox"/> Delete
NAME	KATZ, JORDAN	
STREET ADDRESS	7941 CHULA VISTA CRESANT	
CITY-ST-ZIP	BOCA RATON FL 33433	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Junior Goldstein	
STREET ADDRESS	7923 Chula Vista Crescent	
CITY-ST-ZIP	Boca Raton, Florida 33433	
TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Marilyn Brown	
STREET ADDRESS	22068 Montoya Drive	
CITY-ST-ZIP	Boca Raton, FL 33433	
TITLE	Secretary	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Charlotte Kula	
STREET ADDRESS	7960 Chula Vista Crescent	
CITY-ST-ZIP	Boca Raton, FL 33433	
TITLE	Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Eric Fixler	
STREET ADDRESS	22044 Montebello Drive	
CITY-ST-ZIP	Boca Raton, FL 33433	
TITLE	Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Shirlee Shertz	
STREET ADDRESS	7875 San Marcos Place	
CITY-ST-ZIP	Boca Raton, FL 33433	
TITLE	Treasurer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Jeffrey Silkin	
STREET ADDRESS	7911 Chula Vista Crescent	
CITY-ST-ZIP	Boca Raton, FL 33433	

12. I 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 report or supplemental reports 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: *Jeffrey Silkin* **Jeffrey Silkin - Treasurer** 4/12/04 95A-383-4593
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #