

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

NON-PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

FILED May 13, 1999 8:00 am Secretary of State

05-13-1999 90033 029 ****61.25

DOCUMENT # 751147

1. Corporation Name

BOCA ROYAL PALM CONDOMINIUM ASSOC.

Principal Place of Business

Mailing Address

382 E ROYAL PALM RD BOCA RATON, FL 33432 FL 33432

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

FEI Number

Applied For

21 BOCA ROYAL PALM CO. ASSOC.

BOCA ROYAL PALM COND. ASSOC.

68-0172274

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

22 APT #9

27 P.O. BOX 552

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

City & State

City & State

23 BOCA RATON FL 33432

BOCA RATON

8. This corporation owes the current year Intangible Personal Property Tax.

Yes No

Zip

Country

Zip

Country

24 33432

25 FL

29 33432

30 FL

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MATHEW CARDEIA 16267 FIG WAY DELRAY BEACH FL 33445

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 607.0502 and 607.1508, 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 607.0505, 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

Table with 5 rows of officer information including titles (PRESIDENT, VICE PRESIDENT, TREASURER, SECRETARY) and names (JOHN CARTER, TOM WOTOLEK, VIRINA HORAK, KATHY STAGGS, ELIZABETH ALMEIDA).

Table with 4 rows of change information (1.1 TITLE PD, 2.1 TITLE VPD, 3.1 TITLE TD, 4.1 TITLE SD).

14. 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address, with all other like empowered.

SIGNATURE:

Signature of Virina M. Horak, Treasurer

4/22/99 561 395 7592

Date

Daytime Phone #

CR2E034 (11/98)