

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2004 8:00 am
Secretary of State

03-31-2004 90030 026 ****61.25

DOCUMENT # 751525

1. Entity Name
PRADERA HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
**21367 CAMPO ALLEGRO DR.
BOCA RATON, FL 33433 US**

Mailing Address
**C/O BENCHMARK PROP.
7932 WILES RD
CORAL SPRINGS, FL 33067**

94040286



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03172004

Chg-NP

CR2E037 (10/03)

City & State

City & State

4. FEI Number
59-2154960

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ROBERT KAVE & ASSOC., P.A.
6261 NW 6TH WAY
STE 103
FORT LAUDERDALE, FL 33309**

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

**Filing 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
MCKEEVER, LINDA
6770 PRADERE DR
BOCA RATON, FL 33433 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DIRECTOR-SECRETARY
BRUCE, PAULA
21326 PLACIDA TERR
BOCA RATON FL 33433 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
ARMATER, JOSEPH
21367 CAMPO ALLEGRO DR.
BOCA RATON, FL 33433 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DIRECTOR
BONITATIBUS, CHARMAINE
6790 ALLEGRE CT
BOCA RATON FL 33433 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
EDWARDS, GEORGE
950 N FEDERAL HIGHWAY
POMPANO BEACH, FL 33062 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DIRECTOR
GRUHER, BARRY
21460 CAMPO ALLEGRO DR
BOCA RATON FL 33433 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
GREENWALD, JEROME
21362 CAMPO ALLEGRO DR.
BOCA RATON, FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DS
PETERS, DORIS
21409 CAMPO ALLEGRO DR.
BOCA RATON, FL 33433 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MASH, MARSHA
21530 LAGUNA DR.
BOCA RATON, FL 33433 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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 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:

Linda McKeever, Pres. Pradera HOA 3/17/04

954 344 5353

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #