

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 APR 10 PM 1:50

DOCUMENT # **754222** (8)

1. Corporation Name
THE PINES OF BOCA BARWOOD II CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business Mailing Address
23344 CAROLWOOD LANE BOCA RATON FL 33428

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **09/18/1980** 3a. Date of Last Report **02/04/1994**
4. FEI Number **59-2095445** Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status \$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 **C/O Crest Property Mgmt** 26 **C/O CREST PROPERTY MGMT**
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 **PO BOX 452347** 27 **PO BOX 452347**
City & State City & State
23 **SUNRISE FL** 28 **SUNRISE FL**
Zip Country Zip Country
24 **33345** 25 **USA** 29 **33345** 30 **USA**

9. Name and Address of Current Registered Agent
GLICKMAN, LARRY Z
SACHS & SAX, P.A.
301 YAMATO ROAD, SUITE #4150
BOCA RATON FL 33431

10. Name and Address of New Registered Agent
81 Name **Crest Property Mgmt**
82 Street Address (P.O. Box Numbers Not Acceptable) **4700 HIATUS ROAD #156**
83 **S**
84 City **SUNRISE** FL 85 Zip Code **33351**

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 *Larry Z Glickman* *V.P. Crest Property Mgmt* DATE **4/2/95**

12. OFFICERS AND DIRECTORS

TITLE	SD
NAME	KRAVITZ, DOROTHY
STREET ADDRESS	23345 CAROLWOOD LN APT 5407
CITY - ST - ZIP	BOCA RATON FL
TITLE	D-
NAME	ZENNER, MAX
STREET ADDRESS	23344 CAROLWOOD LN APT 6401
CITY - ST - ZIP	BOCA RATON FL
TITLE	TD-
NAME	STEIN, ISADORE
STREET ADDRESS	23344 CAROLWOOD LN APT 6202
CITY - ST - ZIP	BOCA RATON FL
TITLE	D-
NAME	EDWARD, VERNON
STREET ADDRESS	23344 CAROLWOOD LN APT 6306
CITY - ST - ZIP	BOCA RATON FL
TITLE	PD-
NAME	KAUFMAN, IRVING
STREET ADDRESS	23345 CAROLWOOD LN APT 5404
CITY - ST - ZIP	BOCA RATON FL
TITLE	D-P
NAME	SLOTSKY, IRWIN
STREET ADDRESS	23344 CAROLWOOD LN APT 6508
CITY - ST - ZIP	BOCA RATON FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	
21 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	T/D ZENNER, MAX
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
32 NAME	VP/D RON EIVING
33 STREET ADDRESS	23344 Carolwood Ln # 6-301
34 CITY - ST - ZIP	Boca Raton FL
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	P/D Slutzky IRV
63 STREET ADDRESS	
64 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE: *Larry Z Glickman* *Max Zenner* *Irwin Slotsky* *Irving Kaufman* (305) 746-4357