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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

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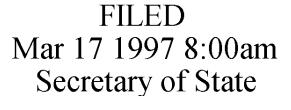
WEST BOCA COMMUNITY COUNCIL, INC.

Principal Place of Business

Mailing Address

23140 S.W. 54TH AVENUE C/O S. KRESCH BOCA RATON FL 33433

23140 S.W. 54TH AVENUE C/O S. KRESCH BOCA RATON FL 33433-7932





					12/08/1980	1996									
2. Principal Place of Business 2a. Mailing Address					4. FEI Number		Applied For								
21 17728 BUCKING hom US 26				22 0	75-5416000		Not Applicable								
Suite, Apt.	#, elc. c/o T. LAMDAU	Suite, Apt. #, etc.	- 	W 65	5. Certificate of Status Desired	□ \$8.7	5 Additional								
22	-,	27	,		5. Obtained of Glades Desired	Fee	Required								
City & State City & State					6. Election Campaign Financing		00 May Be								
23					Trust Fund Contribution		led to Fees								
_ ^ ~ ~ //	11 11/1	Zip	Countr	У	8. This corporation has liability for in	. ~ ~	er s. 199.032,								
24 3 3 7	9. Name and Address of Current	29 30	1		Florida Statutes 10. Name and Address of New Rec	Yes No									
	.g. Hallo alla Madioso di Colloni	. riogistoros rigorit	1 Name												
8936 WARWICK DRIVE BOCA RATON,FLORDIA 33433															
				82 Street Address (P.O. Box Number is Not Acceptable)											
				83 84 City 85 Zip Code											
								11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florida Statutes, the above-named corporation submits this statement or 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 post of directors, hereby accept the appointment as registered							
								office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors (hereb) accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.							
2 2 1/2/20															
Disasture Limited or control marks of contributed ground and title disposable have a functional disposable of the dispos															
12.	OFFICERS AND	DIRECTORS VIVIANO	13.		ADDITIONS/CHANGES TO OFFICE										
TITLE	PD	☐ DELETE	1.1 TITLE		-	∐ Chan	ge 🔲 Addition								
NAME	BRENNER, MILTON		1.2 NAME				·								
STREET ADDRESS	10935 BOCA WOODS LANE		1.3 STREE	ET ADDRESS											
CITY-ST-ZIP	BOCA RATON FL		14 CITY-		· · · · · · · · · · · · · · · · · · ·										
TITLE	8	☐ DELETE	21 TITLE			☐ Chan	ge 🔲 Addition								
NAME	HOLOP, RHODA		22 NAME												
STREET ADDRESS	18090 PARK TERRACE		1	et address											
CITY-ST-ZIP	BOCA RATON FL	DELETE	2. 4 CITY			☐ Chan	ge Addition								
TITLE	VD	- Deceie	3.1 TITLE			стап	ile 🗀 vaniinii								
NAME	WINIKOFF, JEFFREY		3.2 NAME												
STREET ADDRESS	11364 CHISOLM WAY			ET ADDRESS											
CITY-ST-ZIP TITLE	BOCA RATON FL	DELETE	3.4. CITY - 4.1 TITLE	- S1 - ZIP	TROULUNSA	Chan	ge Addition								
NAME	KRESCH, SEYMOUR	The December	4. 2 NAME		The ASSER	ر مان کوری	20								
STREET ADDRESS	23140 SW 54TH AVE			T ADDRESS	Inna & BUCKIA	notem	CF								
CITY-ST-ZIP	BOCA RATON FL		4.4 CITY-	ST-7IP	TREUSURER THEODORYKIN 17728 BUCKIN BOLU RATON	1/2/12	12491								
TITLE	D	DELETE 5.1 TI		01 211	TO THE PERSON OF	☐ Chan	ge Addition								
NAME	BRININ, MILTON		5.2 NAME												
STREET ADDRESS	REXFORD A 3009			T ADDRESS											
CITY - ST - ZIP	BOCA RATON FL			ST-ZIP											
TITLE	D	☐ DELETE	6.1 TITLE			☐ Chang	ge 🔲 Addition								
NAME	LEAVITT, DANIEL		6.2 NAME												
STREET ADDRESS	AINSLIE C 4038		6.3 STREE	T ADDRESS											
CITY-ST-ZIP	BOCA RATON FL		6.4 CITY -	ST-ZIP											
14. I do hereb	ov certify that the information supplied	with this filing does not qualify f	or the ex	emption stated	in Section 119.07(3)(i), Florida Statutes	. I further certify the	hat 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 of 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 altao ment with a address.															
				//	1/1/1 3 /1	. /	i								