

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757539

FILED
Apr 15, 2009
Secretary of State

Entity Name: LA RESIDENCE OF BOCA DEL MAR CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

23200 CAMINO DEL MAR
BOCA RATON, FL 33433

New Principal Place of Business:

Current Mailing Address:

C/O HRT REALTY SERVICES LLC
1200 CLINT MOORE ROAD # 8
BOCA RATON, FL 33487

New Mailing Address:

FEI Number: 59-2082631 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BECKER & POLIAKOFF
625 N. FLAGLER DR. 7TH FLR
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DVP () Delete
Name: MACEACHRON, JOHN
Address: 23200 CAMINO DEL MAR #706
City-St-Zip: BOCA RATON, FL 33433

Title: PD () Delete
Name: MANDELL, BARBARA
Address: 23200 CAMINO DEL MAR #603
City-St-Zip: BOCA RATON, FL 33433

Title: TD (X) Delete
Name: WOLFF, KLANIS
Address: 23200 CAMINO DEL MAR #304
City-St-Zip: BOCA RATON, FL 33433

Title: DS () Delete
Name: PILING, CYNTHIA
Address: 23200 CAMINO DEL MAR # 606
City-St-Zip: BOCA RATON, FL 33433

Title: D () Delete
Name: VAZQUEZ-ORTIZ, ADA
Address: 23200 CAMINO DEL MAR #404
City-St-Zip: BOCA RATON, FL 33433

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DT (X) Change () Addition
Name: PILLING, CYNTHIA
Address: 23200 CAMINO DEL MAR # 606
City-St-Zip: BOCA RATON, FL 33433

Title: D (X) Change () Addition
Name: RINCOOT, PHILIPPE
Address: 23200 CAMINO DEL MAR #703
City-St-Zip: BOCA RATON, FL 33433

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BARBARA MANDELL

P

04/15/2009

Electronic Signature of Signing Officer or Director

Date