

**FILED**  
**May 10, 1999 8:00 am**  
**Secretary of State**

05-10-1999 90242 006 \*\*\*\*61.25

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                    |                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                         |  |
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| <b>NONPROFIT CORPORATION ANNUAL REPORT 1999</b>                                                                                                                                                                                                                                                                                                                                                                                                                 |  |   |                                                                                                                                                                                                                                     | <b>FLORIDA DEPARTMENT OF STATE</b><br><b>Katherine Harris</b><br>Secretary of State<br>DIVISION OF CORPORATIONS                                                                                                                                                                                         |  |
| <b>DOCUMENT # 761055</b><br>1. Corporation Name<br><b>SEA RANCH CLUB OF BOCA CONDOMINIUM ASSOCIATION, INC.</b>                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                    |                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                         |  |
| Principal Place of Business<br><b>4301 NORTH OCEAN BLVD<br/>BOCA RATON FL 33431</b>                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                    | Mailing Address<br><b>4301 NORTH OCEAN BLVD<br/>BOCA RATON FL 33431</b>                                                                                                                                                             |                                                                                                                                                                                                                                                                                                         |  |
| 2. Principal Place of Business<br>21 Suite, Apt. #, etc.<br>22 City & State<br>23 Zip Country                                                                                                                                                                                                                                                                                                                                                                   |  | 2a. Mailing Address<br>26 Suite, Apt. #, etc.<br>27 City & State<br>28 Zip Country |                                                                                                                                                                                                                                     | 3. Date Incorporated or Qualified<br><b>12/21/1981</b><br>4. FEI Number<br><b>59-2149877</b><br>5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required<br>6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees |  |
| 9. Name and Address of Current Registered Agent<br><b>MORGENSTEIN, CHARLES R<br/>BOCA AVIATION BLDG<br/>3700 AIRPORT RD. #307<br/>BOCA RATON FL 33431</b>                                                                                                                                                                                                                                                                                                       |  |                                                                                    | 10. Name and Address of New Registered Agent<br>81 Name<br>82 Street Address (P.O. Box Number is Not Acceptable)<br><b>1761 W. HILLSBORO BLVD</b><br>83 Suite 328<br>84 City <b>DEERFIELD BEACH</b> FL 85 Zip Code <b>33442</b>     |                                                                                                                                                                                                                                                                                                         |  |
| 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes. |  |                                                                                    |                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                         |  |
| SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____                                                                                                                                                                                                                                                                                                                                                                         |  |                                                                                    |                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                         |  |
| 12. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                                                    | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                         |  |
| TITLE <input type="checkbox"/> DELETE<br>NAME <b>P GELLER, LARRY</b><br>STREET ADDRESS <b>4101 N. OCEAN BLVD.</b><br>CITY-ST-ZIP <b>BOCA RATON FL</b>                                                                                                                                                                                                                                                                                                           |  |                                                                                    | 1.1 TITLE <b>DP</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition<br>1.2 NAME<br>1.3 STREET ADDRESS<br>1.4 CITY-ST-ZIP                                                                               |                                                                                                                                                                                                                                                                                                         |  |
| TITLE <input type="checkbox"/> DELETE<br>NAME <b>V BLUM, H. P</b><br>STREET ADDRESS <b>4001 N. OCEAN BLVD.</b><br>CITY-ST-ZIP <b>BOCA RATON FL</b>                                                                                                                                                                                                                                                                                                              |  |                                                                                    | 2.1 TITLE <b>D</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition<br>2.2 NAME<br>2.3 STREET ADDRESS<br>2.4 CITY-ST-ZIP                                                                                |                                                                                                                                                                                                                                                                                                         |  |
| TITLE <input type="checkbox"/> DELETE<br>NAME <b>D JODY, BORIS A</b><br>STREET ADDRESS <b>4301 N OCEAN BLVD</b><br>CITY-ST-ZIP <b>BOCA RATON FL 33431</b>                                                                                                                                                                                                                                                                                                       |  |                                                                                    | 3.1 TITLE<br>3.2 NAME<br>3.3 STREET ADDRESS<br>3.4 CITY-ST-ZIP                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                         |  |
| TITLE <input checked="" type="checkbox"/> DELETE<br>NAME <b>D DUNBAR, CHARLES R</b><br>STREET ADDRESS <b>4301 N OCEAN BLVD, #BLDG B</b><br>CITY-ST-ZIP <b>BOCA RATON FL 33431</b>                                                                                                                                                                                                                                                                               |  |                                                                                    | 4.1 TITLE <b>DV</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition<br>4.2 NAME <b>HILDRETH, BOB</b><br>4.3 STREET ADDRESS <b>4301 N OCEAN BLVD</b><br>4.4 CITY-ST-ZIP <b>BOCA RATON, FL 33431</b>     |                                                                                                                                                                                                                                                                                                         |  |
| TITLE <input checked="" type="checkbox"/> DELETE<br>NAME <b>D RYAN, JOSEPH</b><br>STREET ADDRESS <b>4301 N OCEAN BLVD, #BLDG C</b><br>CITY-ST-ZIP <b>BOCA RATON FL 33431</b>                                                                                                                                                                                                                                                                                    |  |                                                                                    | 5.1 TITLE <b>DS</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition<br>5.2 NAME <b>ISLER, NORMAN P.</b><br>5.3 STREET ADDRESS <b>4201 N OCEAN BLVD</b><br>5.4 CITY-ST-ZIP <b>BOCA RATON, FL 33431</b>  |                                                                                                                                                                                                                                                                                                         |  |
| TITLE <input checked="" type="checkbox"/> DELETE<br>NAME <b>D DUNBAR, CHARLES</b><br>STREET ADDRESS <b>4001 N. OCEAN BLVD.</b><br>CITY-ST-ZIP <b>BOCA RATON FL</b>                                                                                                                                                                                                                                                                                              |  |                                                                                    | 6.1 TITLE <b>DT</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition<br>6.2 NAME <b>NEWILL, JAMES W.</b><br>6.3 STREET ADDRESS <b>4001 N. OCEAN BLVD</b><br>6.4 CITY-ST-ZIP <b>BOCA RATON, FL 33431</b> |                                                                                                                                                                                                                                                                                                         |  |

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

SIGNATURE: Larry Geller **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-22-99

Date

Daytime Phone #

CR2E037 (1/98)

Nonprofit Corporation - Annual Report  
1999

Document # 761055 Additional Officer

547486-90024-4  
Doc # 761055

Title V  
Name Hildreth, Bob  
Street Address 4301 N. Ocean Blvd.  
City-St-Zip Boca Raton, FL 33431

Title S  
Name Isler, Norman P.  
Street Address 4201 N. Ocean Blvd.  
City-St-Zip Boca Raton, FL 33431

Title T  
Name Newill, James W.  
Street Address 4001 N. Ocean Blvd.  
City-St-Zip Boca Raton, FL 33431

Title D  
Name Leigh, Johann M.  
Street Address 4301 N. Ocean Blvd.  
City-St-Zip Boca Raton, FL 33431

Title D  
Name Knopping, Aaron H.  
Street Address 4001 N. Ocean Blvd.  
City-St-Zip Boca Raton, FL 33431

Title D  
Name Greenberg, Jeffrey  
Street Address 4201 N. Ocean Blvd.  
City-St-Zip Boca Raton, FL 33431

Title D  
Name Rothkopf, Saul  
Street Address 4201 N. Ocean Blvd.  
City-St-Zip Boca Raton, FL 33431

Title D  
Name Garfield, Lee  
Street Address 4101 N. Ocean Blvd.  
City-St-Zip Boca Raton, FL 33431

|                |                     |
|----------------|---------------------|
| Title          | D                   |
| Name           | Gotlib, Simon       |
| Street Address | 4101 N. Ocean Blvd. |
| City-St-Zip    | Boca Raton          |

547486-90024-4  
DOC # 761055

There are twelve (12) Directors of Sea Ranch Club of Boca Condominium Association, Inc., four (4) of which hold offices as noted in the following recap:

|                              |                   |
|------------------------------|-------------------|
| President and Director:      | Larry Geller      |
| Vice President and Director: | Bob Hildreth      |
| Secretary and Director:      | Norman P. Isler   |
| Treasurer and Director:      | James W. Newill   |
| Director:                    | Boris A. Jody     |
| Director:                    | Johann M. Leigh   |
| Director:                    | H. Peter Blum     |
| Director:                    | Aaron H. Knopping |
| Director:                    | Jeffrey Greenberg |
| Director:                    | Saul Rothkopf     |
| Director:                    | Lee Garfield      |
| Director:                    | Simon Gotlib      |