

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2004 8:00 am
Secretary of State

04-16-2004 90060 024 ****70.00

DOCUMENT # 761055

1. Entity Name
**SEA RANCH CLUB OF BOCA CONDOMINIUM
ASSOCIATION, INC.**



Principal Place of Business
4301 NORTH OCEAN BLVD
BOCA RATON, FL 33431

Mailing Address
4301 NORTH OCEAN BLVD
BOCA RATON, FL 33431

94053718



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03232004

Chg-NP

CR2E037 (10/03)

4. FEI Number

59-2149877

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

GAGLIANO, KAREN A PA
185 NW SPANISH RIVER BLVD STE 290
BOCA RATON, FL 33431

7. Name and Address of New Registered Agent

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

TITLE D **NAME** FOREMAN, GEORGE **STREET ADDRESS** 4301 N OCEAN BLVD, #A-0608 **CITY-ST-ZIP** BOCA RATON, FL 33431 ☒ Delete ☒ OK

TITLE ☒ D **NAME** FRIEDBURG, MICHAEL **STREET ADDRESS** 4301 N OCEAN BLVD, #A-1107 **CITY-ST-ZIP** BOCA RATON, FL 33431 ☒ Delete

TITLE D **NAME** LEIGH, JOHANN M **STREET ADDRESS** 4301 N OCEAN BLVD, #1403 **CITY-ST-ZIP** BOCA RATON, FL 33431 ☒ Delete ☒ OK

TITLE P **NAME** KNOPPING, AARON H **STREET ADDRESS** 4001 N OCEAN BLVD, #B-PH01 **CITY-ST-ZIP** BOCA RATON, FL 33431 ☒ Delete

TITLE D **NAME** SHULMAN, BERNARD **STREET ADDRESS** 4001 N OCEAN BLVD, #B-1104 **CITY-ST-ZIP** BOCA RATON, FL 33431 ☒ Delete ☒ OK

TITLE ☒ D **NAME** BOTWIN, RITA D **STREET ADDRESS** 4001 N OCEAN BLVD #B-508 **CITY-ST-ZIP** BOCA RATON, FL 33431 ☒ Delete ☒ OK

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Director **NAME** Saul Rothkopf **STREET ADDRESS** 4201 N Ocean Blvd #C-1208 **CITY-ST-ZIP** Boca Raton, FL 33431 ☐ Change ☒ Addition

TITLE Director **NAME** Joseph Aronstein **STREET ADDRESS** 4201 N Ocean Blvd #C-1401 **CITY-ST-ZIP** Boca Raton, FL 33431 ☐ Change ☒ Addition

TITLE Director **NAME** Howard Berger **STREET ADDRESS** 4101 N Ocean Blvd #D-806 **CITY-ST-ZIP** Boca Raton, FL 33431 ☐ Change ☒ Addition

TITLE President **NAME** Friedburg, Michael **STREET ADDRESS** 4301 N Ocean Blvd A-1107 **CITY-ST-ZIP** Boca Raton, FL 33431 ☐ Change ☒ Addition

TITLE ☐ Change ☒ Addition

TITLE ☒ Change ☒ Addition **NAME** **STREET ADDRESS** 4001 N Ocean Blvd B-508 **CITY-ST-ZIP**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/6/04