

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2008 8:00 am
Secretary of State

04-10-2008 90022 016 ****70.00

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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**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03252008 Chg-NP CR2E037 (12/06)

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

7. Name and Address of New Registered Agent

**RANDALL K ROGER & ASSOCIATES, PA
621 NW 53 STREET
SUITE 300
BOCA RATON, FL 33487**

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, 2008**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Delete
NAME **GABSO, GARY**
STREET ADDRESS **4301 N OCEAN BLVD,**
CITY-ST-ZIP **BOCA RATON, FL 33431**

TITLE **D** ☐ Change ☒ Addition
NAME **EVIE SILBERMAN**
STREET ADDRESS **4301 N Ocean Blvd**
CITY-ST-ZIP **Boca Raton, Fl. 33431**

TITLE **D** ☐ Delete
NAME **MARVIN, MARCUS**
STREET ADDRESS **4301 N. OCEAN BLVD**
CITY-ST-ZIP **BOCA RATON, FL 33431**

TITLE **UP** ☐ Change ☒ Addition
NAME **Robin Michaels**
STREET ADDRESS **4301 N Ocean Blvd**
CITY-ST-ZIP **BOCA RATON FL 33431**

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

TITLE **D** ☐ Change ☒ Addition
NAME **BERNARD Shulman**
STREET ADDRESS **4301 N ocean Blvd**
CITY-ST-ZIP **BOCA RATON, FL 33431**

TITLE **D** ☐ Delete
NAME **RQTHKOPF, SAUL**
STREET ADDRESS **4301 N. OCEAN BLVD**
CITY-ST-ZIP **BOCA RATON, FL 33431**

TITLE **D** ☐ Change ☒ Addition
NAME **Bert Perez**
STREET ADDRESS **4301 N OCEAN BLVD**
CITY-ST-ZIP **BOCA RATON, FL 33431**

TITLE **D** ☐ Delete
NAME **KLITZBERG, RICHARD**
STREET ADDRESS **4301 N OCEAN BLVD,**
CITY-ST-ZIP **BOCA RATON, FL 33431**

TITLE **D** ☐ Change ☒ Addition
NAME **SIMON GOTLIB**
STREET ADDRESS **4301 N OCEAN Blvd**
CITY-ST-ZIP **BOCA RATON, FL 33431**

TITLE **P** ☐ Delete
NAME **BOTWIN, RITA D**
STREET ADDRESS **4301 N. OCEAN BLVD**
CITY-ST-ZIP **BOCA RATON, FL 33431**

TITLE **D** ☐ Change ☒ Addition
NAME **Howard Berger**
STREET ADDRESS **4301 N OCEAN Blvd**
CITY-ST-ZIP **BOCA RATON, FL 33431**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Johann M. Leigh
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Johann Leigh

3/28/08 561-395-0447

Date

Daytime Phone #