2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#763362

FILED Apr 24, 2008 Secretary of State

Entity Name: BOCA GROVE PLANTATION PROPERTY OWNER'S ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 21351 WHITAKER DRIVE BOCA RATON, FL 33433 **Current Mailing Address: New Mailing Address:** 21351 WHITAKER DRIVE BOCA RATON, FL 33433 FEI Number: 59-2197321 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LEHNER, EMERSON CHUCK BOCA GROVE GOLF AND TENNIS CLUB 21351 WHITAKER DRIVE BOCA RATON, FL 33433 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition FELDMAN, LARRY Name: Name: 21351 WHITAKER DR Address: Address: City-St-Zip: BOCA RATON, FL 33433 City-St-Zip: Title: () Delete Title: (X) Change () Addition BLUMENKRANTZ, HAROLD Name: HUTENSKY, ALLAN Name: Address: 21351 WHITAKER DR. Address: 21351 WHITAKER DR. City-St-Zip: BOCA RATON, FL 33433 City-St-Zip: BOCA RATON, FL 33433 Title: () Delete Title: (X) Change () Addition HENDLER, AUTA STALLONE, ANDY Name: Name: 21351 WHITAKER DR 21351 WHITAKER DR Address: Address: City-St-Zip: BOCA RATON, FL 33433 City-St-Zip: BOCA RATON, FL 33433 Title: () Delete Title: (X) Change () Addition MANZOTTI, DAVID Name: Name: BLUMENKRANTZ, HAROLD Address: 21351 WHITAKER DR Address: 21351 WHITAKER DR City-St-Zip: BOCA RATON, FL 33433 City-St-Zip: BOCA RATON, FL 33433 Title: () Delete Title: () Change () Addition SCHNOLL, HOWARD Name: Name: 21351 WHITAKER DR Address: Address: City-St-Zip: BOCA RATON, FL 33433 City-St-Zip:

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: HOWARD SCHNOLL T 04/24/2008