

**2003 NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jan 31, 2003 8:00 am**  
**Secretary of State**

01-31-2003 90110 020 \*\*\*\*\*70.00

**DOCUMENT # 769535**

1. Entity Name

**BOCA WALK HOMEOWNERS ASSOCIATION, INC.**



Principal Place of Business

% GREENLITE PROP MGMT.  
141 NW 20TH ST.  
BOCA RATON FL 33431

Mailing Address

301 W CAMINO GARDNERS  
200  
BOCA RATON FL 33432

60011679



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

Glen mgmt. Sns  
Suite, Apt. #, etc. Blvd, Stc 200  
301 W Camino Gardens  
City & State  
Boca Raton, FL

3. Mailing Address

301 W Camino  
Suite, Apt. #, etc.  
Gardens Blvd, Stc 200  
City & State  
Boca Raton, FL

4. FEI Number 59-2378201

Applied For

Not Applicable

Zip  
33432

Country  
USA

Zip  
33432

Country  
USA

5. Certificate of Status Desired

☒ \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

GLEN, A  
301 W CAMINO GARDENS BLVD #200  
BOCA RATON FL 33432

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

FILE NOW: FEE IS \$61.25

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 ☐ Delete  
NAME SCHILLACI, JOANNA  
STREET ADDRESS 6401 WALK CIR  
CITY-ST-ZIP BOCA RATON FL 33433

TITLE PD ☒ Delete  
NAME PURDIE, BETH  
STREET ADDRESS 6355 WALK CIRCLE  
CITY-ST-ZIP BOCA RATON FL 33433

TITLE VPD TREASURER ☐ Delete  
NAME MIRAGLIA CHARLES  
STREET ADDRESS 6397 BOCA CIRCLE  
CITY-ST-ZIP BOCA RATON FL 33433

TITLE SD ☐ Delete  
NAME NEPI, MATTIA  
STREET ADDRESS 6449 BOCA CIRCLE  
CITY-ST-ZIP BOCA RATON FL 33433

TITLE D ☐ Delete  
NAME LOPEZ, ANDREA  
STREET ADDRESS 6406 BOCA CIRCLE  
CITY-ST-ZIP BOCA RATON FL 33433

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

VPD ☐ Change ☒ Addition  
NAME SANDRA WHARTON  
STREET ADDRESS 6379 BOCA CIRCLE  
CITY-ST-ZIP B. RATON, FL 33433

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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 REQUIRED

CHARLES MIRAGLIA Charles Miraglia - TREAS.

1/24/03 FL 3997647

CR2E037 (10/02)