

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 11, 2007 8:00 am
Secretary of State

05-11-2007 90032 031 ****70.00

DOCUMENT # 771051	
1. Entity Name EL VIENTO AT BOCA POINTE MAINTENANCE ASSOCIATION, INC.	
Principal Place of Business C/O ANN MANAGEMENT, INC. 6413 CONGRESS AVE. #220 BOCA RATON, FL 33487 US	Mailing Address C/O ANN MANAGEMENT, INC. 6413 CONGRESS AVE. #220 BOCA RATON, FL 33487 US



40111121



c/o A & N MANAGEMENT
902 CLINT MOORE RD. #110
BOCA RATON, FL 33487

c/o A & N MANAGEMENT
902 CLINT MOORE RD. #110
BOCA RATON, FL 33487

04232007 Chg-NP CR2E037 (12/06)

4. FEI Number 59-2384017	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent RUBINSTEIN, ROBERT C/O BECKER E. POLIAKOFF, P.A. 3111 STIRLING RD. FT. LAUD., FL 33310	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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, 2007

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 NAME STREET ADDRESS CITY-ST-ZIP	PD JOHNSON, RUSSELL 7864 GRANADA PL. #502 BOCA RATON, FL 33433 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Jarosz, James #803 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 7882 Granada Place Boca Raton FL 33433
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BERMAN, STANLEY 7932 SEVILLE PLACE #2104 BOCA RATON, FL 33433 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Lover, Letty <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 7896 Seville place #1508 Boca Raton, FL 33433
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD STEIN, GERALD 7860 SEVILLE PL. #2202 BOCA RATON, FL 33433 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Hoffmann, Richard <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 7930 Granada place #304 Boca Raton FL 33433
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KRAISMAN, PATRICIA 7864 GRANADA PL. #501 BOCA RATON, FL 33433 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Rosenbaum, Barbara <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 7858 Granada place #402 Boca Raton FL 33433
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Mikrad, Elaine <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 7918 Granada place #101 Boca Raton FL 33433
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Tobak, Lee H. <input checked="" type="checkbox"/> Delete <input checked="" type="checkbox"/> Add 7858 Granada place #404 Boca Raton FL 33433	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Berman, Stanley <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 7932 Seville place #2104 Boca Raton FL 33433

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 information.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #