

FILE NOW: FILING FEE IS \$61.25

FILED  
Mar 19 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N00678 (5)  
1. Corporation Name  
BOCA RIDGE GLEN HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business: 20950 BOCA RIDGE DR. W. BOCA RATON FL 33428  
Mailing Address: 20950 BOCA RIDGE DR. W. BOCA RATON FL 33428-1421

3. Date Incorporated or Qualified: 12/30/1983  
3a. Date of Last Report: 03/18/1996

2. Principal Place of Business	2a. Mailing Address	4. FEI Number: 59-2499245	Applied For: Not Applicable
21	26	5. Certificate of Status Desired: <input type="checkbox"/>	\$8.75 Additional Fee Required
Suite, Apt. #, etc.	Suite, Apt. #, etc.	27	27
22	27	6. Election Campaign Financing Trust Fund Contribution: <input type="checkbox"/>	\$5.00 May Be Added to Fees
City & State	City & State	28	28
23	28	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Zip	Country	29	30
24	25	29	30

9. Name and Address of Current Registered Agent GLEN MANAGEMENT SERVICES 4301 OAK CIRCLE 23 BOCA RATON FL 33431	10. Name and Address of New Registered Agent
	81 Name: Stoltz Management Co.
	82 Street Address (P.O. Box Number is Not Acceptable): 301 Yamato Road
	83 Suite # 3101
	84 City: Boca Raton FL 85 Zip Code: 33431

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: Elizabeth J. Jones, mgr. Elizabeth J. Jones DATE: 2/17/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	TD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MIES, MICHEAL	1.2 NAME	
STREET ADDRESS	20913 BOCA RIDGE DRIVE WEST	1.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	1.4 CITY-ST-ZIP	
TITLE	TD <input checked="" type="checkbox"/> DELETE	2.1 TITLE	V PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BUTENSKY, JOE	2.2 NAME	Terry Gerber
STREET ADDRESS	20827 BOCA RIDGE DRIVE NORTH	2.3 STREET ADDRESS	20905 Boca Ridge Drive N.
CITY-ST-ZIP	BOCA RATON FL	2.4 CITY-ST-ZIP	Boca Raton, FL 33428
TITLE	D <input checked="" type="checkbox"/> DELETE	3.1 TITLE	Pres. PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RICHEIMER, JUDD	3.2 NAME	Gordon Hurlbert
STREET ADDRESS	20828 BOCA RIDGE DRIVE NORTH	3.3 STREET ADDRESS	20909 Boca Ridge Drive N.
CITY-ST-ZIP	BOCA RATON FL	3.4 CITY-ST-ZIP	Boca Raton, FL 33428
TITLE	PD <input checked="" type="checkbox"/> DELETE	4.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TOMBERG, STAN	4.2 NAME	Barry H. Galison
STREET ADDRESS	20900 BOCA RIDGE DRIVE WEST	4.3 STREET ADDRESS	20848 Boca Ridge Drive N.
CITY-ST-ZIP	BOCA RATON FL 33428	4.4 CITY-ST-ZIP	Boca Raton, FL 33428
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	Sec. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WEINBERG, SHELLEY	5.2 NAME	
STREET ADDRESS	20901 BOCA RIDGE DRIVE WEST	5.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33428	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* DATE: 2/17/97

CR2E037 (9/96)