FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT #

BOCA RIDGE GLEN HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

20921 BOCKRIDGEDR

Mailing Address

2626 Commercial Blud

May 10, 1999 8:00 am Secretary of State
05-10-1999 90276 013 ****61.25

FILED

2012	1 DOCK RIDGE D	Sto 4				
BOCA	RATON, FL	Ft. Laude	erdale, F	-C		
3342	8 US	22300	/) <			
1	ace of Business	2a. Mailing Address Co Pr	me Manageme	3. Date Incorporated or Qualifed		
21		26 6300 Park of	-Commercel	BWd		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		4. FEI Number	- - - - - - - - - 	plied For
22		27			, \	t Applicable
City & State	9	28 Boca Roton	FL	5. Certifcate of Status Desired	\$8.75 A Fee Re	
Zip	Country	Zip	Country	6. Election Campaign Financing	\$5.00	May Be
24	25	29 33487 B	o USA	Trust Fund Contribution	Added t	o Fees
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registere	d Agent	
101-00	gement Assist	Inc.	81 Name	- Myron Swatt	'	_
1		· I DI I	82 Street	Address (B.O. Bok Number is Not Acceptable)	- DI	0
2621	e E commerc	cial biva	83 83	oo tark of commerce	E DIVO	<u>X</u>
Ste	4		03			
1+1	auderdale 191	33308	84 City	oca Ration F	85 Zip C	>ode >1487
11. Pursuant	to the provinces of Costions 617 0502	and 617 1509 Florida Statutos	, the above-named	corporation submits this statement for the purpose	of changing its	registered
office or re	egistered agent, or both in the State of	Florida, Such change was autions of Section 617 0503, Florid	norized by the corpo la Statutes.	pration's board of directors. I hereby accept the app	ointment as reg	gistered
	//WW/ /XW			4/2	g MOT	
SIGNATURE	TOTAL TOTAL	14	egistered Agent signature re		<u> </u>	
12.	OFFICE AND		13.	ADDITIONS/CHANGES TO OFF/CERS	AND DIRECTO Change	RS IN 12 Addition
TITLE	1 have Star	DELETE	1.1 TITLE	I not a tencky		Addition
NAME		idge Drive W.	1.2 NAME	Joseph Butensky Div	/e N.	
STREET ADDRESS	of one pocar	331120	1.3 STREET ADDRESS	Boss Raton Fi 3346		
CITY-ST-ZIP TITLE	Boca faron, To	_ <u>> > > 4 &</u>	1.4 CITY-ST-ZIP 2.1 TITLE	Deathin, 14 22 10	☐ Change	Addition
NAME	V has stacked		2.2 NAME			
STREET ADDRESS	20905 Bocaki	doe Drive W.	2.3 STREET ADDRESS			
CITY-ST-ZIP	Boca Paten to	33428	2. 4 CITY-ST-ZIP			
TITLE	7	☐ DELETE	3,1 TITLE		Change	☐ Addition
NAME	Schaffer Elin	ne 1	3.2 NAME			ĺ
STREET ADDRESS	20925 Boca R	cidge Drive W	3.3 STREET ADDRESS			
CITY-ST-ZIP	Boca Raton, Fl	33438 □ DELETE	3.4. CITY-ST-ZIP			Addition
TITLE	5., -		4.1 TITLE		Change	Addition
NAME	Richheimer, Ju	ld Son	4. 2 NAME			
STREET ADDRESS	20828 Bpca R10	ge prive N. = 33428	4.3 STREET ADDRESS			
CITY-ST-ZIP	Do ca taton, To	DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change	☐ Addition
NAME	Reckel Heinz		5.2 NAME		•	_
STREET ADDRESS	Jecker, Harrier	lee Drive N.	5.3 STREET ADDRESS			
CITY-ST-ZIP	Roca Rotan F7	33428	5.4 CITY-ST-ZIP			
TITLE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	☐ DELETE	6.1 TITLE		Change	Addition
NAME			6.2 NAME			
STREET ADDRESS	!		6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP			

14. I 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, with all other like empowered.

SIGNATURE: 💆