

NONPROFIT CORPORATION ANNUAL REPORT

1999 2000



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Aug 17, 2000 8:00 am**  
**Secretary of State**

07-19-2000 90002 019 \*\*\*\*61.25

DOCUMENT # N00678

1. Corporation Name

ASSOCIATION, INC.  
BOCA RIDGE GLEN HOMEOWNER'S

Principal Place of Business

Mailing Address

20921 BOCA RIDGE DR.  
BOCA RATON, FL. 33428

6300 PARK OF COMMERCE BLVD  
BOCA RATON, FL. 33487

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		59-2499245	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>	
23		28		\$8.75 Additional Fee Required	
Zip	Country	Zip	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	
24		29		\$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
SWATT, MYRON				81 Name			
6300 PARK OF COMMERCE BLVD				82 Street Address (P.O. Box Number is Not Acceptable)			
BOCA RATON, FL. 33487				83			
				84 City			
				FL 85 Zip Code			

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: *[Signature]* (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PRESIDENT	<input type="checkbox"/> DELETE	1.1 TITLE				<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLAINE SCHAFFEN D		1.2 NAME				
STREET ADDRESS	20925 BOCA RIDGE DR. W		1.3 STREET ADDRESS				
CITY-ST-ZIP	BOCA RATON, FL 33428		1.4 CITY-ST-ZIP				
TITLE	<del>V. PRESIDENT</del>	<input type="checkbox"/> DELETE	2.1 TITLE				<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<del>TERRY GERBER</del>		2.2 NAME				
STREET ADDRESS	<del>20905 BOCA RIDGE DR. W</del>		2.3 STREET ADDRESS				
CITY-ST-ZIP	<del>BOCA RATON, FL 33428</del>		2.4 CITY-ST-ZIP				
TITLE	SECRETARY	<input type="checkbox"/> DELETE	3.1 TITLE				<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SUSAN SPILLERT D		3.2 NAME				
STREET ADDRESS	20928 BOCA RIDGE DR. W		3.3 STREET ADDRESS				
CITY-ST-ZIP	BOCA RATON, FL. 33428		3.4 CITY-ST-ZIP				
TITLE	TREASURER	<input type="checkbox"/> DELETE	4.1 TITLE				<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHARLES GILSBURG		4.2 NAME				
STREET ADDRESS	20909 BOCA RIDGE DR. W		4.3 STREET ADDRESS				
CITY-ST-ZIP	BOCA RATON, FL. 33428		4.4 CITY-ST-ZIP				
TITLE	DIRECTOR	<input type="checkbox"/> DELETE	5.1 TITLE				<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MURRY GRAVITE D		5.2 NAME				
STREET ADDRESS	20847 BOCA RIDGE DR. W.		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 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 as an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* Date: 6/29/00 Daytime Phone #