

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N00875 (7)
1. Corporation Name
PROMENADE AT BOCA POINTE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business Mailing Address
7137 A PROMENADE DR. BOCA RATON FL 33433 **7137 A PROMENADE DR. BOCA RATON FL 33433**

3. Date Incorporated or Qualified **01/12/1984** 3a. Date of Last Report **03/27/1995**
4. FEI Number **59-2385986** Applied For Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 25 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent
CHERNOW, DAVID D. 7137 PROMENADE DR BOCA RATON FL 33433
10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
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 *David Chernow* **David Chernow** **3/14/96**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing) Date

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	S <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARINO, VINCENT	1.2 NAME	
STREET ADDRESS	7145 PROMENADE DRIVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	1.4 CITY-ST-ZIP	
TITLE	P <input type="checkbox"/> DELETE	2.1 TITLE	<i>David Chernow</i> <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHERNOW, DAN	2.2 NAME	
STREET ADDRESS	7137 PROMENADE DR	2.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HELLER, ROBERT	3.2 NAME	
STREET ADDRESS	7129 PROMENADE DR	3.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	3.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WATTENBERG, PHILIP	4.2 NAME	
STREET ADDRESS	7129 PROMENADE DR	4.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	4.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	5.1 TITLE	<i>Ted Borak</i> <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KLEIN, LEONARD	5.2 NAME	<i>7137 Promenade Dr</i>
STREET ADDRESS	7137 PROMENADE DR	5.3 STREET ADDRESS	<i>Boca Raton, FL</i>
CITY-ST-ZIP	BOCA RATON FL	5.4 CITY-ST-ZIP	
TITLE	T <input checked="" type="checkbox"/> DELETE	6.1 TITLE	<i>Leon Greenberg</i> <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ROSEN, HARVEY	6.2 NAME	<i>7145 Promenade Dr</i>
STREET ADDRESS	7137 PROMENADE DR.	6.3 STREET ADDRESS	<i>Boca Raton, FL</i>
CITY-ST-ZIP	BOCA RATON FL	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: *David Chernow* **David Chernow** **3-14-96** **407-395-7732**
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E037 (12/95)