

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 13 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 # 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 33433-6909

3. Date incorporated or Qualified 01/12/1984 3a. Date of Last Report 03/20/1996  
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 Country 28 Zip Country  
24 25 29 30

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 Community Assoc. Services  
82 Street Address (P.O. Box Number is Not Acceptable)  
83 7137 Promenade Dr  
84 City Boca Raton FL 85 Zip Code 33433

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* DATE: 2/13/97  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

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	<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	D <input checked="" 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	V D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KLEIN, LEONARD	5.2 NAME	Borak, Ted
STREET ADDRESS	7137 PROMENADE DR	5.3 STREET ADDRESS	7137 Promenade Dr
CITY-ST-ZIP	BOCA RATON FL	5.4 CITY-ST-ZIP	Boca Raton, FL 33433
TITLE	T <input checked="" type="checkbox"/> DELETE	6.1 TITLE	T <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ROSEN, HARVEY	6.2 NAME	Greenberg, Leon
STREET ADDRESS	7137 PROMENADE DR.	6.3 STREET ADDRESS	7145 Promenade Dr
CITY-ST-ZIP	BOCA RATON FL	6.4 CITY-ST-ZIP	Boca Raton, FL 33433

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: *David Chernow* DATE: 2/13/97 561-395-7732  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone # 0042078

CR2E037 (9/96)