## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra 8. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT # NO

(7)

PROMENADE AT BOCA POINTE CONDOMINIUM ASSOCIATION

Principal Place of Business Mailing Address

7137 A PROMENADE DR. 7137 A PROMENADE DR. BOCA RATON FL 33433 BOCA RATON FL 33433

FILED Mar 06 1998 8:00am Secretary of State

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BOCA RATON FL 33433		BOCA RATON FL 33433		3. Date Incorporated or Qualified 01/12/1984		
					4. FEI Number	Applied For
					59-2385986	Not Applicat
· · · · · · · · · · · · · · · · · · ·	lace of Business	2a. Mailing Address			5. Certificate of Status Desired	\$8.75 Additional
Sulte, Apt.	# ptc	Suite, Apt. #, etc.		·	# Floring Organics Floring	Fee Required
22	#, BIG.	27			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
City & State	9	City & State			7. Is this nonprofit corporation a homeowner	
23		28			Yes [	
Zip	Country	Zip	Country	<del>,</del>	8. This corporation owes or has paid the cur	rent year Intangible
24	25	29	30			]Yes ☐ No
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registered	Agent
			81	Name	•	
COMMU	NITY ASSOC. SERVICES		82	Street Add	ress (P.O. Box Number Is Not Acceptable)	***************************************
7137 PR	OMENADE DR		<u> </u>			
BOCA R	ATON FL 33433		63			
			84	City		85 Zip Code
			-	1	<u></u>	' '
agent. I a	m familiar with, and accept the oblig	ations of, Section 617.0503, F	lorida Statute	s.	poration submits this statement for the purpose of tion's board of directors. I hereby accept the app	Ollittiietit as legistoled
BIGINATURE _	Signature, typed or printed name of registered ag-		TE: Registered Ag	ent eignature requi	Ired when reinstating) DATE	
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND	
TITLE	S	☐ DELETE	1.1 TITLE			Change Additi
NAME	MARINO, VINCENT		1.2 NAME			
STREET ADDRESS	7145 PROMENADE DRIVE		1.3 STREET			
CITY-ST-ZIP	BOCA RATON FL	- December	1.4 CITY-5	ST-ZIP		Change Additi
TITLE	P	☐ DELETE	2.1 TITLE			☐ Change ☐ Aodio
NAME	CHERNOW, DAN 7137 PROMENADE DR		2.2 NAME			
STREET ADDRESS			2.3 STREET			
CITY-ST-ZIP TITLE	BOCA RATON FL D	☐ DELETE	2.4 CITY- 3.1 TITLE	ST-ZIP		Change Additi
NAME	HELLER, ROBERT		3.2 NAME			
STREET ADDRESS	7129 PROMENADE DR		3.3 STREET	AOODECC		
CITY-ST-ZWP	BOCA RATON FL		3.4. CITY-	1		
TITLE	D	DELETE	4.1 TITLE	31-2#		☐ Change ☐ Additi
NAME	WATTENBERG, PHILIP		4. 2 NAME	ì		· ·
STREET ADDRESS	7129 PROMENADE DR			ADDRESS		
CITY-ST-ZIP	BOCA RATON FL		4.4 CITY-5			
TITLE	VD	DELETE	5.1 TITLE			☐ Change ☐ Additi
NAME	BORAK, TED		5.2 NAME			
STREET ADDRESS	7137 PROMENADE DR		5.3 STREET	ADDRESS		
CITY-ST-ZIP	BOCA RATON FL		5.4 CITY-5	ì		
TITLE	T	DELETE	61 TITLE			Change Additi
NAME .	GREENBERG, LEON		6.2 NAME			
STREET ADDRESS	7145 PROMENADE DR		6.3 STREET	ADDRESS		
CITY-ST-ZIP	BOCA RATON FL		6.4 CITY-5	ST-ZIP		
· · · · · · · · · · · · · · · ·						-A14 - A1 - A A1 - 1 - 4 - man - A1-

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 attachmonth with an address.

SIGNATURE:

Dan Christian

2-27-98

561-395-7732