

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2003 8:00 am
Secretary of State

03-06-2003 90132 001 ****61.25

DOCUMENT # N08791

1. Entity Name

LA JOYA OF BOCA HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business

**C/O LARRY E. SCHNER
750 S. DIXIE HIGHWAY
BOCA RATON FL 33432**

Mailing Address

**C/O LARRY E. SCHNER
750 S. DIXIE HIGHWAY
BOCA RATON FL 33432**

10032267



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2641184**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SCHNER, LARRY E. P.A.
750 SO. DIXIE HIGHWAY
BOCA RATON FL 33432**

Name

Street Address (P.O. Box Number Is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME	D BELLOT, WILLIAM	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	23246 L'ERMITAGE CI	
CITY-ST-ZIP	BOCA RATON FL 33433	
TITLE NAME	VD MURPHY, DAWN	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	23198 L'ERMITAGE CI	
CITY-ST-ZIP	BOCA RATON FL 33433	
TITLE NAME	TD WEXLER, ETHEL	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	23108 L'ERMITAGE CIRCLE	
CITY-ST-ZIP	BOCA RATON FL 33433	
TITLE NAME	SD DUBIN, MARILYN	<input type="checkbox"/> Delete
STREET ADDRESS	23042 L'ERMITAGE CI	
CITY-ST-ZIP	BOCA RATON FL 33433	
TITLE NAME	D CORBETT, JAMES	<input type="checkbox"/> Delete
STREET ADDRESS	23005 L'ERMITAGE CI	
CITY-ST-ZIP	BOCA RATON FL 33433	
TITLE NAME	D DANSON, EMILY	<input type="checkbox"/> Delete
STREET ADDRESS	23215 L' ERMITAGE CIR.	
CITY-ST-ZIP	BOCA RATON FL 33433	

TITLE NAME	P HAUBRICH, Gunter	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	23059 L'Ermitage CI	
CITY-ST-ZIP	Boca Raton FL 33433	
TITLE NAME	S Martin, Cheryl	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	23162 L'Ermitage CI	
CITY-ST-ZIP	Boca Raton FL 33433	
TITLE NAME	D KRASNER, Jules	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	23012 L'Ermitage CI	
CITY-ST-ZIP	Boca Raton FL 33433	
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **JOHN DAVID BEUTLER** **D** **HAUBRICH** 1/18/03 954-427-0707

CR2E037 (10/02)