

02-17-2003 90193 008 ****61.25

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

DOCUMENT # N09082

1. Entity Name
CORAL LAKE AT BOCA RATON HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business
6300 PARK OF COMMERCE BLVD
BOCA RATON, FL 33487 US

Mailing Address
6300 PARK OF COMMERCE BLVD
BOCA RATON, FL 33487 US

2. Principal Place of Business
CAS

3. Mailing Address
951 BROKEN SOUND PKWY

State, Apt. #, etc.
250

City & State
BOCA RATON, FL

Zip
33434

Country
USA

4. FEI Number
65-0287140

Applied For
 Not Applicable

5. Certificate of Status Obtained
 \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**STEIN, ROSENBERG & WINKOFF, P.A.
% JEFFREY A. WINKOFF, ESQ.
4975 N. FEDERAL HWY.
FORT LAUDERDALE, FL 33308**

7. Name and Address of New Registered Agent
Name
JOEL MESSINGER C/O CAS

Street Address (P.O. Box Number is Not Acceptable)
951 BROKEN SOUND PKWY STE 250

City
BOCA RATON

State
FL

Zip Code
33467

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] **2/25/03**

9. Election Campaign Financing Trust Fund Contribution
 \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
		FUCHS, LOUIS	9438 BOCA RIVER CIR	BOCA RATON, FL 33434	<input type="checkbox"/>
	S	FITTER, LISA TAYLOR	9398 BOCA RIVER CIRCLE	BOCA RATON, FL 33434	<input checked="" type="checkbox"/>
	TD	BRANDES, JANE LASMAN	9392 BOCA RIVER CIRCLE	BOCA RATON, FL 33434	<input type="checkbox"/>
	SD	IMBURGIO, JOANNE	9412 BOCA RIVER CIRCLE	BOCA RATON, FL 33434	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE	CHANGE	ADDITION
SD	JO ANN IMBURGIO	9412 BOCA RIVER CIR	BOCA RATON, FL 33434	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
D	WILLIAM KALIES	9397 BOCA RIVER CIR	BOCA RATON, FL 33434	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
VPD	DANIEL TURCHIARELLI	9416 BOCA RIVER CIR	BOCA RATON, FL 33434	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information included 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, changed, or an authorized agent with an address, with all other like empowered.

SIGNATURE: *[Signature]* **2/25/03**