

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 # **N09765 (1)**

1. Corporation Name
EL VIENTO AT BOCA POINTE CONDOMINIUM ASSOCIATION NO. 2, INC.



Principal Place of Business: **C/O BEACON PROPERTY MGMT. ONE N OCEAN BLVD. STE 7 BOCA RATON FL 33432**
Mailing Address: **C/O BEACON PROPERTY MGMT. ONE N OCEAN BLVD. STE 7 BOCA RATON FL 33432**

3. Date Incorporated or Qualified: **06/14/1985**
3a. Date of Last Report: **04/19/1995**

2. Principal Place of Business 21 7884 Seville Place Suite, Apt. #, etc.	2a. Mailing Address 26 500 E. Spanish River Blvd. Suite, Apt. #, etc.	4. FEI Number 59-2646214	Applied For <input type="checkbox"/> Not Applicable
22 City & State 23 Boca Raton, FL.	27 City & State #18 Boca Raton, FL.	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
24 Zip	25 Country	28 Zip 33431	29 Country
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	

**WILLIS, ERNEST W.
C/O BEACON PROPERTY MANAGEMENT, INC.
ONE N. OCEAN BLVD., STE. 7
BOCA RATON FL 33432**

81 Name: **Ernest W. Willis**
82 Street Address (P.O. Box Number is Not Acceptable): **c/o BEACON Property Mgmt.**
83 **500 E. Spanish River Blvd #18**
84 City: **Boca Raton** FL 85 Zip Code: **33431**

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: *[Signature]* **Ernest W. Willis** DATE: **3-27-96**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: PO <input checked="" type="checkbox"/> DELETE	NAME: PHILLIPS, CAROL	11 TITLE: P.D. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
STREET ADDRESS: 7920 SEVILLE PL	CITY-ST-ZIP: BOCA RATON FL	12 NAME: Jerry Miller	13 STREET ADDRESS: 7890 Seville Pl. #1404, Boca Raton, FL.
TITLE: D <input type="checkbox"/> DELETE	NAME: WEBER, BARBRA	21 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS: 7926 SEVILLE PL. #2001	CITY-ST-ZIP: BOCA RATON FL	22 NAME:	23 STREET ADDRESS:
TITLE: D <input checked="" type="checkbox"/> DELETE	NAME: LIEBERMAN, DAVID	31 TITLE: V.D. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
STREET ADDRESS: 7878 SEVILLE PLACE	CITY-ST-ZIP: BOCA RATON FL	32 NAME: Arthur Selitzer	33 STREET ADDRESS: 7866 Seville Pl. #2301, Boca Raton, FL.
TITLE: STD <input type="checkbox"/> DELETE	NAME: ROTENBERG, JERRY	41 TITLE: D.T. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS: 7878 SEVILLE PL. #2501	CITY-ST-ZIP: BOCA RATON FL	42 NAME:	43 STREET ADDRESS:
TITLE: D <input checked="" type="checkbox"/> DELETE	NAME: SHRIER, FLORENCE	51 TITLE: S.D. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
STREET ADDRESS: 7908 SEVILLE PLACE	CITY-ST-ZIP: BOCA RATON FL	52 NAME: Jerry Stein	53 STREET ADDRESS: 7860 Seville Pl. #2202, Boca Raton, FL.
TITLE: D <input checked="" type="checkbox"/> DELETE	NAME: GREENE, SUMNER	61 TITLE: D. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
STREET ADDRESS: 7866 SEVILLE PL #2304	CITY-ST-ZIP: BOCA RATON FL	62 NAME: Arthur Taitz	63 STREET ADDRESS: 7920 Seville Pl. #1903, Boca Raton, FL.
		64 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)(k), 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: *[Signature]* **Jerry Miller, President** DATE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (12/95)