2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N11711

1. Entity Name
TRENDS AT BOCA RATON HOMEOWNERS'



FILED Apr 28, 2008 8:00 am Secretary of State 04-28-2008 90409 039 ****61.25

ASSOCIATION, INC.						1.0	12.5	• • • • •	7714				
Principal Place POINTE MAN 75 NE 6TH A DELRAY BEA	AGEMENT IVE #206		C/O E 1280	ng Address Exclusive Property Management 30 S.W. 36 Ave., Suite 301 Mpano Beach, Fl. 33069 US				4008					
Principal Place of Business - No P.O. Box # 3. Mailing Address													
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				01212008 Cr	na ND	CDOENS	7 /10/06\			
City & State			City & State					4. FEI Number	ng-NP	CRZEUS	7 (12/06)	plied For	
								59-267029	9		No	t Applicable	
Zip Country			Zip	Zip Count				5. Certificate of St.	atus Desired		\$8.75 Add Fee Required		
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent													
ESTERAM	E7 EDIC	ı.			-	Name							
ESTEBAMEZ, ERIC 75 NE 6TH AVE #206					t	Street Address (P.O. Box Number is Not Acceptable)							
DELRAY BEACH, FL 33483													
					_	0			=		7:- 0		
						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 Signature, typed or printed name of registered agent and title if applicable (NOTE Repistered Agent signature required when reinstating) OATE												
1.	-												
	_	ee is \$61.25 Way 1, 2008		Election Can Trust Fund C				\$5.00 May Be Added to Fees			payable to ment of St		
10. OFFICERS AND DIRECTORS					11.			ADDITIONS/CHANG					
TITLE	PD	OTTICERS AND DI	nLC10A3	Delete	TITLE	Į-	~	DOMONS/CHANG	ES TO OFFICE	13 AND DIE	☐ Change	☐ Addition	
NAME	LONG, W	/ILLIAM		NAM			Long	x, William					
STREET ADDRESS							Long, William 22 925 Old Inlet 13 ridge Drive Boca Raton, FL 33433						
CITY-ST-ZIP	BOCA RA	ATON, FL 33433	CITY			ST-ZIP	Boca	a Katon,	FL 334	33			
TITLE	D			☐ Delete	TITLE			`			Change	☐ Addition	
NAME OTREET ADDRESS	ı	SSWORTH, JIM	**		NAME	· I							
STREET ADDRESS CITY-ST-ZIP	1	JNFIELD DRIVE ATON, FL 33433				ST-ZIP							
TITLE	SD	11011,12 33433		☐ Delete	TITLE						Change	☐ Addition	
NAME		GH. ROBERT		CT Delete	NAME						□ Ouende	Addition	
STREET ADDRESS	22310 SA	ANDS POINT DR			STREE	TADDRESS							
CITY-ST-ZIP	BOCA RA	ATON, FL 33433			CITY-	ST-ZIP							
TITLE	VPD			☐ Delete	TITLE		VV	Con (u)			Change	☐ Addition	
NAMÉ	BROWN,				NAME		Brut	un, gary	Daint				
STREET ADDRESS CITY-ST-ZIP	1	ANDS POINT DR				ST-ZIP	222	31 sands	/ 9(/ [(
		ATON, FL 33433		<u></u>		31-21-	7				Change	☐ Addition	
TITLE NAME	D SAMBUC	O, ANGIE		☐ Delete	TITLE		₹a n	nhucovar	gie		C Change	☐ Addition	
STREET ADDRESS				STR			231	ambuco, Angie 3035 Sunfield Dr boca Raton, FL 33433					
CITY-ST-ZIP	1	ATON, FL 33433			CITY-	ST-ZIP	Boc	a Raton	FL 33	1433			
TITLE				☐ Delete	TITLE						☐ Change	Addition	
NAME	1				NAME	.							
STREET ADDRESS			$\overline{}$			ET ADDRESS							
CITY-ST-ZiP	1		 			ST-ZIP			de Co	franker 1	f sh	for any 2017 -	
12. I hereby	certify that th	ne information sup plie d wit	rthis filing	does not qualify to	r the exer	mptions co	ontained	i in Chapter 119, Flor	rida Statutes. I :	iurther certi	iy that the in	rormation or director	

indicated on this report or supplemental report's true and accurate and that pay signature shall have the same legal effect as it made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute his 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: 🗘

11-23-08 Date Daytime Phone #