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 # **N12016** **(4)**

1. Corporation Name

BOCA LANDINGS HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
2255 GLADES ROAD #324-A BOCA RATON FL 33431	2255 GLADES ROAD #324-A BOCA RATON FL 33431

3. Date Incorporated or Qualified: **11/12/1985**

3a. Date of Last Report: **03/28/1995**

2. Principal Place of Business
21 1215 E. HILLSBORO BLVD
Suite, Apt. #, etc.
22
City & State
23 DEERFIELD BCH, FL
Zip 24 33441 Country 25

2a. Mailing Address
26 1215 E HILLSBORO BLVD
Suite, Apt. #, etc.
27
City & State
28 DEERFIELD BCH, FL
Zip 29 33441 Country 30

4. FEI Number: **59-2652809** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

GELFAND, MICHAEL J ESQ.
ONE CLEARLAKE CENTRE, SUITE 1010
250 SOUTH AUSTRALIAN AVENUE
WEST PALM BEACH FL 33401-5012

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	☑ DELETE	1.1 TITLE	DP	☑ Change ☐ Addition
NAME	SANTIAGO, PETE		1.2 NAME	PORTALATIN, GLADYS	
STREET ADDRESS	9497 AEGEAN DRIVE		1.3 STREET ADDRESS	9512 LAKE SERENA DR.	
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY-ST-ZIP	BOCA RATON, FL. 33496	
TITLE	DV	☑ DELETE	2.1 TITLE	DV	☑ Change ☐ Addition
NAME	JASKY, LISA		2.2 NAME	HARAZIN, JACKIE	
STREET ADDRESS	9537 TAVERNIER DRIVE		2.3 STREET ADDRESS	9533 ISLAMORADA TERR	
CITY-ST-ZIP	BOCA RATON FL		2.4 CITY-ST-ZIP	BOCA RATON, FL. 33496	
TITLE	DS	☐ DELETE	3.1 TITLE	D	☐ Change ☑ Addition
NAME	HERNEK, BARBARA		3.2 NAME	MINNICK, HARRY	
STREET ADDRESS	9507 LAKE SERENA DRIVE		3.3 STREET ADDRESS	9670 ENCHANTED PT. LN	
CITY-ST-ZIP	BOCA RATON FL		3.4 CITY-ST-ZIP	BOCA RATON, FL. 33496	
TITLE	DT	☑ DELETE	4.1 TITLE	DT	☑ Change ☐ Addition
NAME	MILLER, ROBERT		4.2 NAME	SOUTO, BARBARA	
STREET ADDRESS	18720 CASSANDRA POINTE LANE		4.3 STREET ADDRESS	9271 LAKE SERENA DR	
CITY-ST-ZIP	BOCA RATON FL		4.4 CITY-ST-ZIP	BOCA RATON, FL 33496	
TITLE	DV	☑ DELETE	5.1 TITLE	DV	☑ Change ☐ Addition
NAME	CHENEVERT, FRED		5.2 NAME	HORTZ, ERIC	
STREET ADDRESS	9915 ROBINS NEST ROAD		5.3 STREET ADDRESS	9540 Lake SERENA DR	
CITY-ST-ZIP	BOCA RATON FL		5.4 CITY-ST-ZIP	BOCA RATON, FL. 33496	
TITLE	D	☑ DELETE	6.1 TITLE	D	☑ Change ☐ Addition
NAME	KOSHETZ, BERNARD		6.2 NAME	PENCOOK, DOROTHY	
STREET ADDRESS	18891 LACOSTA LANE		6.3 STREET ADDRESS	9987 ROBINS NEST RD	
CITY-ST-ZIP	BOCA RATON FL		6.4 CITY-ST-ZIP	BOCA RATON, FL 33496	

CR2E037 (12/95)

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: Barbara Lybernet Secretary 2/20/96 407-367-3090
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ADDITIONS

D RUIST, ANGELO
9471 LAKE SERENA DR.
BOCA RATON, FL
33496

D PHEIFER, STUART
18816 CASPIAN CR.
BOCA RATON, FL
33496