

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 APR 19 AM 8:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N17257 (9)

1. Corporation Name

**LA MIRADA AT BOCA PONTE CONDOMINIUM ASSOCIATION
NUMBER SEVEN, INC.**

Principal Place of Business

Mailing Address

1051 SO ROGERS CIR
BOCA RATON FL 33487
US

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BOCA RATON FL 33487
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **10/15/1986** 3a. Date of Last Report **03/15/1994**

4. FBI Number **65-0112047** Applied For Not Applicable

5. Certificate of Status Desired **\$6.75 Additional Fee Required**

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

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status **\$68.75 Supplemental Fee Not Required**

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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

24 Country

28 Zip

29 Country

24

25

29

30

9. Name and Address of Current Registered Agent

**IRVING, JUNE M.
% PRIME MANAGEMENT GROUP, INC
1051 SO ROGERS CIR
BOCA RATON FL 33487**

10. Name and Address of New Registered Agent

81 Name **MYRON SWATT**
82 Street Address (P.O. Box Number is Not Acceptable) **62 PRIME MANAGEMENT GROUP, INC.**
83 **1051 S. ROGERS CIR**
84 City **BOCA RATON** 85 FL 86 Zip Code **33487**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: *[Signature]* (NOTE: Registered Agent signature required when reinstating) DATE: **3/28/95**

12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	TD	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TRACY, SONORA R.	1.2 NAME	
STREET ADDRESS	7835 LA MIRADA DR.	1.3 STREET ADDRESS	
CITY - ST - ZIP	BOCA RATON FL	1.4 CITY - ST - ZIP	
TITLE	PD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COHEN, LEON	2.2 NAME	
STREET ADDRESS	7773 LA MIRADA DR	2.3 STREET ADDRESS	
CITY - ST - ZIP	BOCA RATON FL	2.4 CITY - ST - ZIP	
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VINGENNE, HELEN	3.2 NAME	
STREET ADDRESS	7899 LA MIRADA DR	3.3 STREET ADDRESS	
CITY - ST - ZIP	BOCA RATON FL	3.4 CITY - ST - ZIP	
TITLE	SD	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STAMMER, DANIEL	4.2 NAME	
STREET ADDRESS	7838 LA MIRADA DRIVE	4.3 STREET ADDRESS	
CITY - ST - ZIP	BOCA RATON FL	4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* DATE: **3/28/95**