

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 15, 2001 8:00 am
Secretary of State

05-15-2001 90160 032 ****61.25

0051667

DOCUMENT # N23337

1. Entity Name

BOCA BAY HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

9645 CAROUSEL CIRC SOUTH
 BOCA RATON FL 33434
 US

P.O. BOX B600
 BOCA RATON FL 33429-B600
 US

00051719



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

9600 Carousell Circle S
 Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Boca Raton FL

4. FEI Number

65-0021705

Applied For

Not Applicable

Zip
 33434

Country
 USA

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HARTMAN, EDWARD P
 502 NE 48TH STREET
 BOCA RATON FL 33431-5124

Name

Street Address (P.O. Box Number is Not Acceptable)

9600 Carousell Circle South

City

Boca Raton

FL

Zip Code

33434

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: VPD
 NAME: GROSS, BEVERLY
 STREET ADDRESS: 9584 EAST LAKE DRIVE
 CITY-ST-ZIP: BOCA RATON FL Delete

TITLE: SD
 NAME: Michael Adamowicz
 STREET ADDRESS: 4581 East Lake Drive
 CITY-ST-ZIP: Boca Raton, FL 33434 Change Addition

TITLE: PD
 NAME: BIFANO, ANTHONY
 STREET ADDRESS: 9645 CAROUSEL CIR SOUTH
 CITY-ST-ZIP: BOCA RATON FL Delete

TITLE: [Blank]
 NAME: [Blank]
 STREET ADDRESS: [Blank]
 CITY-ST-ZIP: [Blank] Change Addition

TITLE: D
 NAME: GROSS, RONALD
 STREET ADDRESS: 9584 EAST LAKE DR
 CITY-ST-ZIP: BOCA RATON FL Delete

TITLE: [Blank]
 NAME: [Blank]
 STREET ADDRESS: [Blank]
 CITY-ST-ZIP: [Blank] Change Addition

TITLE: T
 NAME: NEWMAN, CHRISTINA L
 STREET ADDRESS: 9669 CAROUSEL CIRCLE NORTH
 CITY-ST-ZIP: BOCA RATON FL 33434 Delete

TITLE: [Blank]
 NAME: [Blank]
 STREET ADDRESS: [Blank]
 CITY-ST-ZIP: [Blank] Change Addition

TITLE: S
 NAME: WAGNER, STUART
 STREET ADDRESS: 9656 WEST LAKE COURT
 CITY-ST-ZIP: BOCA RATON FL 33434 Delete

TITLE: [Blank]
 NAME: [Blank]
 STREET ADDRESS: [Blank]
 CITY-ST-ZIP: [Blank] Change Addition

TITLE: [Blank]
 NAME: [Blank]
 STREET ADDRESS: [Blank]
 CITY-ST-ZIP: [Blank] Delete

TITLE: [Blank]
 NAME: [Blank]
 STREET ADDRESS: [Blank]
 CITY-ST-ZIP: [Blank] Change Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Anthony Bifano

4-29-01 511-558-9442

CR2E037 (10/00)