2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2001 8:00 am
Secretary of State
03-06-2001 90007 041 ****61.25

DOCUMENT # N28673

1. Entity Name

IMPRESSIONS AT BOCA CHASE HOMEOWNERS ASSOCIATION

Principal Place of Business	Mailing Address
PRIME MANAGEMENT 6300 S. PRK OF COMM BOCA RATON FL 33487	PRIME MANAGEMENT 6300 S. PRK OF COMM BOCA RATON FL 33487

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0152323 ☐ Applied For ☐ Not Applicable

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
SACHUK, KEITH 6300 PARK OF COMMERCE BLVD C/O PRIME MANGEMENT GROUP INC. BOCA RATON FL 33498	Name Street SWATT, MYRON 6300-PK-OF-COMMERCE-BLVD BOCA RATON, FL 33487 City / 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.

SIGNATURE _____ 2/28/01
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	DP CAMPBELL, DON 21270 MILLBROOK CT. BOCA RATON FL 33498	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Miller Robert 21441 Millbrook Ct Boca Raton FL 33498	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP BURLON, ANGELO 21451 SAWMILL CT BOCA RATON FL 33498	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WEISNER, ANN 21270 MILLBROOK CT BOCA RATON FL 33498	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD MAURICIO MANNY 11262 JASMINE CIR. BOCA RATON FL 33498	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T FOX, ED 11389 CORAL BAY DR BOCA RATON FL 33498	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S/TD CURRY JOHN 11194 JASMINE HILL CIR. BOCA RATON FL 33498	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/00)

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: SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #