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Secretary of State

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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N42566

1. Corporation Name

BALBOA POINT ASSOCIATION, INC.

464201 - 90017 - 14

Principal Place of Business

951 BROKEN SOUND PKWY
SUITE 250
BOCA RATON FL 33487

Mailing Address

951 BROKEN SOUND PKWY
SUITE 250
BOCA RATON FL 33487



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

03/14/1991

4. FEI Number

65-0320980

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

Fee Required

6. Election Campaign Financing

\$5.00 May Be

Trust Fund Contribution

Added to Fees

9. Name and Address of Current Registered Agent

COMMUNITY ASSOCIATION SERVICES INC.
951 BROKEN SOUND PKWY, STE 250
BOCA RATON FL 33487

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE TD
NAME RUDICH, FLORENCE
STREET ADDRESS 17332 BALBOA PT. WAY
CITY-ST-ZIP BOCA RATON FL 33487

TITLE PD
NAME GREENFIELD, ROBERT N
STREET ADDRESS 17212 BALBOA POINT-WAY
CITY-ST-ZIP BOCA RATON FL

TITLE D
NAME BAUER, KARL
STREET ADDRESS 17194 VENTANA DRIVE
CITY-ST-ZIP BOCA RATON FL 33487

TITLE SD
NAME PITTLE, MARSHALL A
STREET ADDRESS 17308 BALBOA PT WAY
CITY-ST-ZIP BOCA RATON FL 33487

TITLE D
NAME RENTZER, LINDA
STREET ADDRESS 17260 BALBOA POINT WAY
CITY-ST-ZIP BOCA RATON FL 33487

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE VP/D
2.2 NAME Robert Greenfield
2.3 STREET ADDRESS 17212 Balboa Point Way
2.4 CITY-ST-ZIP Boca Raton, FL 33467

3.1 TITLE P/D
3.2 NAME Karl Bauer
3.3 STREET ADDRESS 17194 Ventana Drive
3.4 CITY-ST-ZIP Boca Raton, FL 33487

4.1 TITLE S/D
4.2 NAME Doris Levin
4.3 STREET ADDRESS 17285 Balboa Point Way
4.4 CITY-ST-ZIP Boca Raton, FL 33487

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

4/1/99

(861) 998-7944

CR2E037 (1/198)