

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 07, 2002 8:00 am
Secretary of State

03-07-2002 90005 049 ****61.25

DOCUMENT # N92000000431

1. Entity Name

CORAL ISLE AT BOCA CHASE MASTER HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

PRIME-MGMT GROUP INC
 6300 PARK OF COMMERCE BLVD
 BOCA RATON FL 33487
 US

PRIME MGMT GROUP INC
 6300 PARK OF COMMERCE BLVD
 BOCA RATON FL 33487
 US

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

65-0448347

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MYRON SWATT
6300 PARK OF COMMERCE BLVD
PRIME MANAGEMENT GROUP INC
BOCA RATON FL 33487

Name

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

City

FL

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

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	Delete
PD	LEVINE, BURTON	18343 CORAL SANDSWAY	BOCA RATON FL 33498	<input type="checkbox"/>
SD	PARIS, SHELDON	18248 CORAL ISLES DRIVE	BOCA RATON FL 33498	<input type="checkbox"/>
DV	SCHILLING, HANK	18296 CORAL ISLE DR	BOCA RATON FL 33498	<input checked="" type="checkbox"/>
TD	GELETER, ABBOT	18270 CORAL CHASE DR	BOCA RATON FL 33498	<input type="checkbox"/>
D	WAGNER, BROCK	18288 CORAL ISLES DR	BOCA RATON FL 33498	<input checked="" type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
Dir	Ron North	18315 Coral Isles Drive	BOCA RATON FL 33498	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Dir	Byran Goodyer	11328 Coral Key DR	BOCA RATON FL 33498	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 another title empowered.

SIGNATURE: *X*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Abbott Geleter

Date: **3/1/23/02**

Deadline: **989-5024**

CR2E037 (9/01)