

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001222

FILED
Feb 14, 2007
Secretary of State

Entity Name: MIZNER POINTE OF BOCA HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

8290 VIA ANCHO
BOCA RATON, FL 33433

New Principal Place of Business:

Current Mailing Address:

C/O HRT REALTY SERVICES LLC
1060 HOLLAND DRIVE #3-D
BOCA RATON, FL 33487

New Mailing Address:

FEI Number: 65-0737925 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BACKER, KEITH F ESQ.
136 EAST BOCA RATON
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: GREENE, ROBERT
Address: 8701 VIA ANCHO
City-St-Zip: BOCA RATON, FL 33433

Title: P () Delete
Name: KAPLAN, MARVIN
Address: 8516 VIA D'ORO
City-St-Zip: BOCA RATON, FL 33433

Title: D () Delete
Name: GUSTAFSSON, ANDERS
Address: 8665 VIA ANCHO
City-St-Zip: BOCA RATON, FL 33433

Title: VP () Delete
Name: DEMCHAK, MIKE
Address: 8676 VIA ANCHO
City-St-Zip: BOCA RATON, FL 33433

Title: T () Delete
Name: SHRUM, JAMES
Address: 8260 VIA SERENA
City-St-Zip: BOCA RATON, FL 33433

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: PURANK, VIRAJ
Address: 210188 VIA EDEN
City-St-Zip: BOCA RATON, FL 33433

Title: D (X) Change () Addition
Name: DEMCHAK, MIKE
Address: 8676 VIA ANCHO
City-St-Zip: BOCA RATON, FL 33433

Title: TD (X) Change () Addition
Name: SHRUM, JAMES
Address: 8260 VIA SERENA
City-St-Zip: BOCA RATON, FL 33433

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARVIN KAPLAN

Electronic Signature of Signing Officer or Director

P

02/14/2007

Date