

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Apr 22, 2008  
Secretary of State

DOCUMENT# N97000001222

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:**

2200 NORTH FEDERAL HIGHWAY  
SUITE 212  
BOCA RATON, FL 33431

**Current Mailing Address:**

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

**New Mailing Address:**

2200 NORTH FEDERAL HIGHWAY  
SUITE 212  
BOCA RATON, FL 33431

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:**

PLAZURE, LENNIE  
2200 N. FEDERAL HIGHWAY  
SUITE 212  
BOCA RATON, FL 33431 US

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: LENNIE PLAZURE

04/22/2008

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: KAMENASH, DEBORAH  
Address: 8516 VIA D'ORO VIA SERENA  
City-St-Zip: BOCA RATON, FL 33433

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

Title: D ( ) Delete  
Name: ROSENBERG, GARY  
Address: 8676 VIA ANCHO VIA VENTURA  
City-St-Zip: BOCA RATON, FL 33433

Title: TD ( ) Delete  
Name: WEISBERG, DAVID  
Address: 21256 VIA FIORE  
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: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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

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

I hereby certify that the information supplied with this filing does not qualify 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: DEBORAH KAMENASH

PD

04/22/2008

Electronic Signature of Signing Officer or Director

Date