

FILED
May 08, 1999 8:00 am
Secretary of State

05-08-1999 90012 024 ****70.00

NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N98000002816

1. Corporation Name

THE PITTSBURGH CLUB OF BOCA RATON, INC.

558590 - 90030 - 7

Principal Place of Business C/O DARLINE WEST 380 NW 67TH STREET NO. 202 BOCA RATON FL 33487	Mailing Address C/O DARLINE WEST 380 NW 67TH STREET NO. 202 BOCA RATON FL 33487
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2. Principal Place of Business 21 - Suite, Apt. #, etc. 22 - City & State 23 - Zip 24 - Country	2a. Mailing Address 26 - Suite, Apt. #, etc. 27 - City & State 28 - Zip 29 - Country	3. Date Incorporated or Qualified 05/15/1998	4. FEI Number 65-0886330 Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent MARTIN, DEBORAH S ESQ C/O MARTIN & GERAGI, P.A. 4145 NW 58TH LANE BOCA RATON FL 33496	10. Name and Address of New Registered Agent 81 Name DARLINE MARIE WEST 82 Street Address (P.O. Box Number is Not Acceptable) # 380 N.W. 67th Street #202 83 84 City BOCA RATON FL 85 Zip Code 33487
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11. Pursuant to the provisions of Sections 817.0502 and 817.1508, 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 817.4503, Florida Statutes.

SIGNATURE: *Darline Marie West* DATE: **4/28/99**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		1.2 NAME D	
STREET ADDRESS		1.3 STREET ADDRESS Roland Mahoney	
CITY-ST-ZIP		1.4 CITY-ST-ZIP 598 N.W. 38th Avenue	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME D	
STREET ADDRESS		2.3 STREET ADDRESS Robert Bubarth	
CITY-ST-ZIP		2.4 CITY-ST-ZIP 5787 Camino del Sol	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME D	
STREET ADDRESS		3.3 STREET ADDRESS Darline Marie West	
CITY-ST-ZIP		3.4 CITY-ST-ZIP 380 N.W. 67th Street #202	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME D	
STREET ADDRESS		4.3 STREET ADDRESS Diana J. Burkey	
CITY-ST-ZIP		4.4 CITY-ST-ZIP 275 N.E. 29th St.	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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)(f), 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: *Darline Marie West Secretary* DATE: **4/28/99** (561)989-0048

CR2E037 (1/198)