

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 18, 1994.
AMOUNT DUE ON OR BEFORE 8/18/94: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

CORPORATION
ANNUAL REPORT
1994



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

94 JUL 15 PM 2:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N10591 (8)

1. Corporation Name

SOUTHWINDS AT BOCA POINTE HOMEOWNERS' ASSOCIATIO
N, INC.

Mailing Address
1280 SOUTH POWERLINE ROAD #25
#671-CINEBAR DRIVE
POMPANO BEACH FL 33069

Principal Place of Business
1280 SOUTH POWERLINE ROAD #25
#671-CINEBAR DRIVE
POMPANO BEACH FL 33069

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/07/1985	3a. Date of Last Report 03/29/1993
4. FEI Number 59-2581835	Applied For Not Applicable
5. Certificate of Status Debated \$8.75 Additional Fee Required	6. Election Carried Over Financing Trust Fund Contributions
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under § 199.032, Florida Statutes	Yes No

If above addresses are incorrect in any way, line through incorrect information and enter correction below

2. Mailing Address 21. 1280 South Powerline Rd 22. Suite, Apt. #, etc. #25 23. City & State Pompano Beach, FL 24. Zip 33069 25. Country	2a. Principal Place of Business 26. 1280 South Powerline Rd 27. Suite, Apt. #, etc. #25 28. City & State Pompano Beach, FL 29. Zip 33069 30. Country
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9. Name and Address of Current Registered Agent

DEVELOPMENT CONSULTANTS, INC.
2901 SIMMS STREET
HOLLYWOOD FL 33020

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 607.0502 and 607.1508 or 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 607.0505 or 617.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and true full name of agent

Signature, typed or printed name of registered agent and true full name of agent

Signature

12. OFFICERS AND DIRECTORS		13. CHANGES TO OFFICERS AND DIRECTORS IN 1994	
1. TITLE	P/D	1. TITLE	
2. NAME	ANN RITA STERLING	2. NAME	
3. STREET ADDRESS	7634 ELMRIDGE DRIVE	3. STREET ADDRESS	
4. CITY, ST, ZIP	BOCA RATON FL	4. CITY, ST, ZIP	
5. TITLE	V/D	5. TITLE	V/D/T
6. NAME	ROSENBERG, JULIUS	6. NAME	WEIDENBAUM, SHARI
7. STREET ADDRESS	7629 CINEBAR DRIVE	7. STREET ADDRESS	7623 CINEBAR DRIVE
8. CITY, ST, ZIP	BOCA RATON FL	8. CITY, ST, ZIP	BOCA RATON FL
9. TITLE	S/D	9. TITLE	S/D
10. NAME	WEIDENBAUM, SHARI	10. NAME	PAUL VOGEL
11. STREET ADDRESS	7623 CINEBAR DRIVE	11. STREET ADDRESS	7647 CINEBAR DRIVE
12. CITY, ST, ZIP	BOCA RATON FL	12. CITY, ST, ZIP	BOCA RATON FL
13. TITLE	D	13. TITLE	D
14. NAME	COSENZA, THOMAS	14. NAME	GILBERT, JANET
15. STREET ADDRESS	7602 ELMRIDGE DRIVE	15. STREET ADDRESS	7663 CINEBAR DRIVE
16. CITY, ST, ZIP	BOCA RATON FL	16. CITY, ST, ZIP	BOCA RATON FL
17. TITLE	T/D	17. TITLE	D
18. NAME	WURTZBURG, RAY	18. NAME	TREGERMAN, MANNY
19. STREET ADDRESS	7650 ELMRIDGE DRIVE	19. STREET ADDRESS	7612 ELMRIDGE DRIVE
20. CITY, ST, ZIP	BOCA RATON FL	20. CITY, ST, ZIP	BOCA RATON FL
21. TITLE		21. TITLE	
22. NAME		22. NAME	
23. STREET ADDRESS		23. STREET ADDRESS	
24. CITY, ST, ZIP		24. CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and is true and correct, and that I am an officer or director of the corporation of the record or duly empowered to execute this report as required by Chapter 607 or Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report or as an attachment with an address.

SIGNATURE:

Shari Weidenbaum
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/13/94