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Feb 07 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N02989 (4)

1. Corporation Name

ESPLANADA AT BOCA POINTE HOMEOWNERS' ASSOCIATION
, INC.

Principal Place of Business

Mailing Address

% PRIME MANAGEMENT GROUP, INC.
1061 S. ROGERS CIRCLE
BOCA RATON FL 33487
US1215 E. HILLSBORO BLVD.
DEERFIELD BEACH FL 33441-4203
US3. Date Incorporated or Qualified
05/09/19843a. Date of Last Report
11/01/19964. FEI Number
59-2646234Applied For
Not Applicable5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution ☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CAMPBELL PROPERTY MANAGEMENT, INC
1215 E. HILLSBORO BLVD
DEERFIELD BEACH FL 33441

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 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE
NAME VOLK, SHELLY
STREET ADDRESS 22584 ESPLANADA CIR.
CITY-ST-ZIP BOCA RATON FL 334331.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIPTITLE T ☐ DELETE
NAME SOLTZ, SIDNEY
STREET ADDRESS 22660 ESPLANADA CIR.
CITY-ST-ZIP BOCA RATON FL 334332.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIPTITLE S ☐ DELETE
NAME GOLDMAN, JESSE
STREET ADDRESS 22640 ESPLANADA CIR.
CITY-ST-ZIP BOCA RATON FL 334333.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIPTITLE D ☐ DELETE
NAME LEVINE, IRV
STREET ADDRESS 22647 ESPLANADA CIR.
CITY-ST-ZIP BOCA RATON FL 334334.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIPTITLE D ☐ DELETE
NAME POMEROY, GEORGE
STREET ADDRESS 22589 ESPLANADA CIR.
CITY-ST-ZIP BOCA RATON FL 334335.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIPTITLE D ☐ DELETE
NAME RIECHENTHAL, HAL
STREET ADDRESS 22672 ESPLANADA CIR.
CITY-ST-ZIP BOCA RATON FL 334336.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0042789

CR2E037 (9/96)