FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

N06141

(8)

PROMENADE AT BOCA POINTE CONDOMINIUM ASSOCIATION

Principal Place of Business Mailing Address 7137 A PROMENADE DR 7137 A PROMENADE DR **BOCA RATON FL 33433-6903 BOCA RATON FL 33433-6909** 3. Date Incorporated or Qualified 3a. Date of Last Report 11/13/1984 03/18/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2643019 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country This corporation has liability for intangible tax under s. 199.032, Yes No 24 30 Florida Statutes 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Community Assoc dervices RATNER, WILLIAM Street Address (P.O. Box Number is Not Acceptable) 82 7225 PROMENADE DR 83 **BOCA RATON FL 33433** rom enade 7/37 64 City Zip Code コファスコ 85 3000 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 any lamitian with and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12 13. □ DELETE 1.1 TITLE Change Addition TITLE SHAPIRO, BENJAMIN 1.2 NAME NAME 7225 PROMENADE DR 1.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL** 1.4 CITY - ST - ZIP CITY - ST - ZIF DELETE 2.1 TITLE VP Addition TITLE RATNER, WILLIAM 2.2 NAME NAME 7225 PROMENADE DRIVE 2.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL** 2.4 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ DELETE 3.1 TITLE Addition SD NOLAND, BERNICE 3.2 NAME NAME 7217 PROMENADE DRIVE 3.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL** 3.4. CITY-ST-ZIP CHTY-ST-7IP DELETE Change Addition TITLE 4.1 TITLE NAME SOLTZ, HARRY 4.2 NAME 7217 PROMENADE DRIVE 4.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL** 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE # Addition Change TITLE 5.1 TITLE KITE, BERNARD 5.2 NAME NAME 7209 PROMENADE DR **5.3 STREET ADDRESS** STREET ADDRESS **BOCA RATON FL** 5.4 CITY - ST - ZIP CITY-ST-ZIP ☐ Addition ☐ DELETE ☐ Change TITLE 6.1 TITLE 6.2 NAME NAME

> 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

THE WIFE D

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.

FILED

Feb 12 1997 8:00am

Secretary of State

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