

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000001191

1. Entity Name

THE SHORES AT BOCA RATON HOMEOWNERS' ASSOCIATION, INC. ✓

Principal Place of Business

18900 OCEAN MIST DRIVE  
BOCA RATON FL 33498  
US

Mailing Address

18900 OCEAN MIST DRIVE  
BOCA RATON FL 33498  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0536881

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

~~ROSS, NANCY E ESQ.~~  
~~% ST. JOHN, DICKER, KRIVOK & GORE P.A.~~ St. John, Core, Fiore &  
500 AUSTRALIAN AVENUE S., 3000 Lemme, P.A.  
WEST PALM BEACH FL 33401

8. 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

*David St John* PRESIDENT

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

(NOTE: Registered Agent signature required when reinstating)

DATE

01/09/02

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete  
NAME ROSENHOUSE, HOWARD  
STREET ADDRESS 18718 SEATURTLE LANE  
CITY-ST-ZIP BOCA RATON FL 33498

TITLE VD ☐ Change ☒ Addition  
NAME Burkholz, Neil  
STREET ADDRESS 11223 Sea Grass Circle  
CITY-ST-ZIP Boca Raton, FL 33498

TITLE VD ☒ Delete  
NAME KAVANAGH, MICHAEL  
STREET ADDRESS 18660 OCEAN MIST DRIVE  
CITY-ST-ZIP BOCA RATON FL 33498

TITLE SD ☐ Change ☒ Addition  
NAME Greene, Felice  
STREET ADDRESS 18736 Ocean Mist Drive  
CITY-ST-ZIP Boca Raton, FL 33498

TITLE TD ☐ Delete  
NAME LEE, MELISSA  
STREET ADDRESS 18540 OCEAN MIST DRIVE  
CITY-ST-ZIP BOCA RATON FL 33498

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VD ☐ Delete  
NAME BERGMAN, PETER  
STREET ADDRESS 18637 OCEAN MIST DRIVE  
CITY-ST-ZIP BOCA RATON FL 33498

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE S ☒ Delete  
NAME PASTOR, SYB  
STREET ADDRESS 18584 HARBOR LIGHT WAY  
CITY-ST-ZIP BOCA RATON FL 33498

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Jan. 23, 2002 (561) 852-4145

CR2E037 (9/01)