2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#744150

FILED Mar 27, 2009 Secretary of State

Entity Name: BOCA RIDGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

21 SE 5TH STREET 21 SE 5TH STREET #100 BOCA RATON, FL 33432

BOCA RATON, FL 33432

Current Mailing Address: New Mailing Address:

21 SE 5TH STREET 21 SE 5TH STREET #100 BOCA RATON, FL 33432

BOCA RATON, FL 33432

FEI Number: 59-1984511 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

BISHOP, TERESA C 21 SE 5TH STREET #100 BOCA RATON, FL 33432 US

OFFICERS AND DIRECTORS:

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:

Electronic Signature of Registered Agent Date

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Name and Address of Current Registered Agent:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name and Address of New Registered Agent:

Fitle: D () Delete Title: P (X) Change () Addition

 Name:
 CARLIN, JAMES
 Name:
 CARLIN, JAMES

 Address:
 9256 A SABLE RIDGE CIR
 Address:
 9256-A SABLE RIDGE CIR

 City-St-Zip:
 BOCA RATON, FL 33428
 City-St-Zip:
 BOCA RATON, FL 33428

Title: VP () Delete Title: VP (X) Change () Addition Name: VISLCOKY, JOHN Name: VISLCOKY, JOHN

Address: 9358 B SABLE RIDGE CIR Address: 9358-B SABLE RIDGE CIR
City-St-Zip: BOCA RATON, FL 33428 City-St-Zip: BOCA RATON, FL 33428

Title: ST () Delete Title: ST (X) Change () Addition
Name: PIZZOFERRATO, ANNA
Address: 9353 D. SARI E. RIDGE CIR

 Address:
 9352 D SABLE RIDGE CIR
 Address:
 9352-D SABLE RIDGE CIR

 City-St-Zip:
 BOCA RATON, FL 33428
 City-St-Zip:
 BOCA RATON, FL 33428

Title: () Delete Title: D () Change (X) Addition

 Name:
 Name:
 MOSCHELLO, JR, JOSEPH

 Address:
 Address:
 9240-B SABLE RIDGE CIR

 City-St-Zip:
 City-St-Zip:
 BOCA RATON, FL 33428

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES CARLIN P 03/27/2009