# 2015 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 724365

Entity Name: BOCA WEST MASTER ASSOCIATION, INC.

### **Current Principal Place of Business:**

20540 CNTRY CLUB BLVD #105 BOCA RATON, FL 33434

## **Current Mailing Address:**

20540 CNTRY CLUB BLVD #105 BOCA RATON, FL 33434

### FEI Number: 59-1619611

### Name and Address of Current Registered Agent:

BACKER LAW FIRM PA 400 S DIXIE HIGHWAY STE 420 BOCA RATON, FL 33432 US FILED Mar 26, 2015 Secretary of State CC0143334044

Certificate of Status Desired: No

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

# Officer/Director Detail :

Oncer/Director Detail :				
Title	PRESIDENT, DIRECTOR	Title	VP1, DIRECTOR	
Name	KOVAL, LOU	Name	ISROFF, CHARLES	
Address	20540 CNTRY CLUB BLVD #105	Address	20540 CNTRY CLUB BLVD #105	
City-State-Zip:	BOCA RATON FL 33434	City-State-Zip:	BOCA RATON FL 33434	
Title	DIRECTOR, SECRETARY	Title	VP3	
Name	KUGLER, SOL	Name	MCCLURE, PAULA	
Address	20540 CNTRY CLUB BLVD #105	Address	20540 CNTRY CLUB BLVD #105	
City-State-Zip:	BOCA RATON FL 33434	City-State-Zip:	BOCA RATON FL 33434	
<b>T</b> :0 -		Title	TREASURER, DIRECTOR	
Title	SECOND VP, DIRECTOR			
Name	LOCKER, EDWARD	Name	ROMANOW, HERBERT	
Address	20540 COUNTRY CLUB BLVD SUITE 105	Address	20540 COUNTRY CLUB DRIVE STE 105	
City-State-Zip:	BOCA RATON FL 33434	City-State-Zip:	BOCA RATON FL 33434	
			DIDECTOR	
Title	DIRECTOR	Title	DIRECTOR	
Name	HIRSCH, HOWARD	Name	KROSSER, HOWARD	
Address	20540 COUNTRY CLUB DRIVE	Address	20540 CNTRY CLUB BLVD #105	
	STE 105	City-State-Zip:	BOCA RATON FL 33434	
City-State-Zip:	BOCA RATON FL 33434	-		
City-State-Zip:		City-State-Zip:	BOCA RATON FL 33434	

I hereby 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 all other like empowered.

SIGNATURE: PAULA MCCLURE

DIRECTOR

03/26/2015

Date

Electronic Signature of Signing Officer/Director Detail

Date