

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 724365

**Entity Name:** BOCA WEST MASTER ASSOCIATION, INC.**Current Principal Place of Business:**20540 COUNTRY CLUB BLVD., #105  
BOCA RATON, FL 33434**Current Mailing Address:**20540 COUNTRY CLUB BLVD., #105  
BOCA RATON, FL 33434**FEI Number: 59-1619611****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**ASSOCIATED CORPORATE SERVICES  
6111 BROKEN SOUND PARKWAY NW, SUITE200  
BOCA RATON, FL 33487 US*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

**Officer/Director Detail :**

Title PRESIDENT, DIRECTOR  
Name KOVAL, LOU  
Address 20540 CNTRY CLUB BLVD #105  
City-State-Zip: BOCA RATON FL 33434

Title TREASURER, DIRECTOR  
Name ROMANOW, HERBERT  
Address 20540 COUNTRY CLUB DRIVE  
STE 105  
City-State-Zip: BOCA RATON FL 33434

Title DIRECTOR, VP  
Name KROSSER, HOWARD  
Address 20540 COUNTRY CLUB BLVD #105  
City-State-Zip: BOCA RATON FL 33434

Title DIRECTOR  
Name FRIEDMAN, BERNARD  
Address 20540 COUNTRY CLUB BLVD #105  
City-State-Zip: BOCA RATON FL 33434

Title VP, DIRECTOR  
Name LOCKER, EDWARD  
Address 20540 COUNTRY CLUB BLVD  
SUITE 105  
City-State-Zip: BOCA RATON FL 33434

Title DIRECTOR, SECRETARY  
Name SCHLIFKE, BERNARD  
Address 20540 COUNTRY CLUB BLVD #105  
STE 105  
City-State-Zip: BOCA RATON FL 33434

Title EXECUTIVE DIRECTOR, VP  
Name BAECHT, BRAD  
Address 20540 COUNTRY CLUB BLVD #105  
City-State-Zip: BOCA RATON FL 33434

Title DIRECTOR  
Name FOGELMAN, AVRON  
Address 20540 COUNTRY CLUB BLVD #105  
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: BRAD BAECHT****EXECUTIVE DIRECTOR****02/28/2018**

Electronic Signature of Signing Officer/Director Detail

Date