

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 753544

**FILED  
Mar 31, 2015  
Secretary of State  
CC9023825040**

**Entity Name:** BOCA MARINA HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

MAHOGANY SERVICES INC.  
21 SE 5TH STREET, 100  
BOCA RATON, FL 33432

**Current Mailing Address:**

MAHOGANY SERVICES INC.  
21 SE 5TH STREET, 100  
BOCA RATON, FL 33432 US

**FEI Number: 59-2174005**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

BISHOP, TERESA  
21 SE 5TH STREET, #100  
BOCA RATON, FL 33432 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 P  
Name ZIMSKI, EDMOND  
Address 636 BOCA MARINA COURT  
City-State-Zip: BOCA RATON FL 33487

Title VP  
Name RABINOWITZ, ALAN  
Address 630 MARINA COURT  
City-State-Zip: BOCA RATON FL 33487

Title SECRETARY  
Name BERGMAN, DAVE  
Address 657 BOCA MARINA COURT  
City-State-Zip: BOCA RATON FL 33487

Title TREASURER  
Name PALMER, WILLIAM  
Address 5326 BOCA MARINA CIRCLE  
City-State-Zip: BOCA RATON FL 33487

Title VP  
Name SILBER, DENNIS  
Address 640 BOCA MARINA COURT  
City-State-Zip: BOCA RATON FL 33487

*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: EDMOND ZIMSKI**

**PRESIDENT**

**03/31/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date