

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 761559

**Entity Name:** BOCA PATIO VILLAGE HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**7465 ANDORRA PLACE  
BOCA RATON, FL 33433**Current Mailing Address:**7465 ANDORRA PLACE  
BOCA RATON, FL 33433 US**FEI Number:** 65-0207577**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SOLID ROCK PROPERTY MANAGEMENT, LLC  
7465 ANDORRA PLACE  
BOCA RATON, FL 33433 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	GELFOND, WENDY R
Address	C/O SOLID ROCK PROP MGMT PO BOX 880475
City-State-Zip:	BOCA RATON FL 33488-0475

Title	TREASURER
Name	MILLER, LOU
Address	C/O SOLID ROCK PROP MGMT PO BOX 880475
City-State-Zip:	BOCA RATON FL 33488-0475

Title	VP
Name	HAIG, KEVIN
Address	C/O SOLID ROCK PROP MGMT PO BOX 880475
City-State-Zip:	BOCA RATON FL 33488-0475

Title	SEC
Name	BLOOM, SAMUEL
Address	C/O SOLID ROCK PROP MGMT PO BOX 880475
City-State-Zip:	BOCA RATON FL 33488-0475

Title	DIRECTOR
Name	PERKINS, EDWIN L
Address	C/O SOLID ROCK PROP MGMT PO BOX 880475
City-State-Zip:	BOCA RATON FL 33488-0475

*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:** WENDY GELFOND**PRESIDENT****03/26/2013**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date