

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

DOCUMENT# N00678

**Entity Name:** BOCA RIDGE GLEN HOMEOWNERS' ASSOCIATION, INC.

**FILED**  
**Apr 02, 2015**  
**Secretary of State**  
**CC9654262801**

**Current Principal Place of Business:**

UNITED COMMUNITY MANAGEMENT CORP.  
11784 WEST SAMPLE ROAD 103  
CORAL SPRINGS, FL 33065

**Current Mailing Address:**

UNITED COMMUNITY MANAGEMENT CORP.  
11784 WEST SAMPLE ROAD 103  
CORAL SPRINGS, FL 33065 US

**FEI Number: 59-2499245**

**Certificate of Status Desired: No**

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

CAMPBELL, RENEE  
UNITED COMMUNITY MANAGEMENT CORP.  
11784 WEST SAMPLE ROAD 103  
CORAL SPRINGS, FL 33065 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: RENEE CAMPBELL**

**04/02/2015**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name GARDNER, MARLENE  
Address 20839 BOCA RIDGE DRIVE NORTH  
City-State-Zip: BOCA RATON FL 33428

Title VP  
Name SCHWARTZ, PETER  
Address 20828 BOCA RIDGE DRIVE NORTH  
City-State-Zip: BOCA RATON FL 33428

Title S  
Name LONTOK, JUAN  
Address 20961 BOCA RIDGE DRIVE WEST  
City-State-Zip: BOCA RATON FL 33428

Title T  
Name NOGUERA, ELADIO  
Address 20929 BOCA RIDGE DRIVE WEST  
City-State-Zip: BOCA RATON FL 33428

Title D  
Name SCHNEIDER, ALEXANDRA  
Address 20949 BOCA RIDGE DRIVE WEST  
City-State-Zip: BOCA RATON FL 33428

*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: MARLENE GARDNER**

**P**

**04/02/2015**

Electronic Signature of Signing Officer/Director Detail

Date