

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02989

**FILED**  
**Jan 19, 2017**  
**Secretary of State**  
**CC8004385142**

**Entity Name:** ESPLANADA AT BOCA POINTE HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O ASSOCIATION SERVICES OF FLORIDA  
10112 USA TODAY WAY  
MIRAMAR, FL 33025

**Current Mailing Address:**

C/O ASSOCIATION SERVICES OF FLORIDA  
10112 USA TODAY WAY  
MIRAMAR, FL 33025 US

**FEI Number: 59-2646234**

**Certificate of Status Desired: No**

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

RODRIGUEZ, MARC  
C/O ASSOCIATION SERVICES OF FLORIDA  
10112 USA TODAY WAY  
MIRAMAR, FL 33025 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: MARC RODRIGUEZ**

**01/19/2017**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           PRESIDENT  
Name           GOLDEN, ROBERT  
Address        10112 USA TODAY WAY  
City-State-Zip: MIRAMAR FL 33025

Title           VICE PRESENT  
Name           WEISBERG, GENE  
Address        10112 USA TODAY WAY  
City-State-Zip: MIRAMAR FL 33025

Title           SECRETARY  
Name           DRANDOFF, STEVE  
Address        10112 USA TODAY WAY  
City-State-Zip: MIRAMAR FL 33025

Title           TREASURER  
Name           CARPENTERI, AMY  
Address        10112 USA TODAY WAY  
City-State-Zip: MIRAMAR FL 33025

Title           DIRECTOR  
Name           SOCOLOV, LIONEL  
Address        10112 USA TODAY WAY  
City-State-Zip: MIRAMAR FL 33025

Title           DIRECTOR  
Name           BLUM, KRISTINE  
Address        10112 USA TODAY WAY  
City-State-Zip: MIRAMAR FL 33025

Title           DIRECTOR  
Name           WINDHEIM, BARBARA  
Address        10112 USA TODAY WAY  
City-State-Zip: MIRAMAR FL 33025

*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: ROBERT GOLDEN**

**PRESIDENT**

**01/19/2017**

Electronic Signature of Signing Officer/Director Detail

Date