2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03554

Entity Name: VILLA FLORA AT BOCA POINTE HOMEOWNERS ASSOCIATION,

INC.

FILED Apr 25, 2013 **Secretary of State** CC3200665110

Current Principal Place of Business:

299 WEST CAMINO GARDENS BLVD #203

BOCA RATON, FL 33432

Current Mailing Address:

299 WEST CAMINO GARDENS BLVD #203 BOCA RATON, FL 33432 US

FEI Number: 59-2739558 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STEVENS & GOLDWYN PA 2 S UNIVERSITY DR 329

PLANTATION FL 33324 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:

Officer/Director Detail:

Title Title

Electronic Signature of Registered Agent

Name EHRLICH, GAIL Name WINTHROP, AGGIE

299 WEST CAMINO GARDENS BLVD 299 WEST CAMINO GARDENS BLVD Address Address

City-State-Zip: BOCA RATON FL 33432 City-State-Zip: BOCA RATON FL 33432

Title Т Title S

Name WICKSTEIN, ALLAN Name LEONARD, DAVID

299 WEST CAMINO GARDENS BLVD 299 WEST CAMINO GARDENS BLVD Address Address

BOCA RATON FL 33432 City-State-Zip: BOCA RATON FL 33432 City-State-Zip:

Title Title D D

Name DELMAN, FRANK Name KRUTCHIK, BERNIE

Address 299 WEST CAMINO GARDENS BLVD Address 299 WEST CAMINO GARDENS BLVD

#203

City-State-Zip: BOCA RATON FL 33432 City-State-Zip: BOCA RATON FL 33432

Title D

Name MOTYKA, BONNIE

Address 299 WEST CAMINO GARDENS BLVD

#203

BOCA RATON FL 33432 City-State-Zip:

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: GAIL EHRLICH Ρ 04/25/2013

Date