

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23337

Entity Name: BOCA BAY HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**C/O QUALITY MANAGEMENT GROUP
9045 LA FONTANA BLVD. STE101
BOCA RATON, FL 33434**Current Mailing Address:**C/O QUALITY MANAGEMENT GROUP
9045 LA FONTANA BLVD. STE101
BOCA RATON, FL 33434 US**FEI Number:** 65-0021705**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ST. JOHM, ROSSIN, BURR & LEMME, PLLC
1601 FORUM PLACE
SUITE 701
WEST PALM BEACH, FL 33401 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	PD
Name	WEAKLAND, LORI
Address	C/O QUALITY MANAGEMENT GROUP 9045 LA FONTANA BLVD. STE101
City-State-Zip:	BOCA RATON FL 33434

Title	SECRETARY
Name	BUCKLEY, JOAN
Address	C/O QUALITY MANAGEMENT GROUP 9045 LA FONTANA BLVD. STE101
City-State-Zip:	BOCA RATON FL 33434

Title	DIRECTOR
Name	BURNS, WILLIAM
Address	C/O QUALITY MANAGEMENT GROUP 9045 LA FONTANA BLVD. STE101
City-State-Zip:	BOCA RATON FL 33434

Title	VP
Name	TRIFUNOVIC, MLADEN
Address	C/O QUALITY MANAGEMENT GROUP 9045 LA FONTANA BLVD. STE101
City-State-Zip:	BOCA RATON FL 33434

Title	TREASURER
Name	WOODMORE, WILLIAM
Address	C/O QUALITY MANAGEMENT GROUP 9045 LA FONTANA BLVD. STE101
City-State-Zip:	BOCA RATON FL 33434

Title	DIRECTOR
Name	FRANCE, PASCAL
Address	C/O QUALITY MANAGEMENT GROUP 9045 LA FONTANA BLVD. STE101
City-State-Zip:	BOCA RATON FL 33434

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: LORI WEAKLAND**PRESIDENT****02/14/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date