

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N24438

**Entity Name:** MONTEGO BAY AT BOCA POINTE PROPERTY OWNERS ASSOCIATION, INC.**FILED**  
**Mar 31, 2014**  
**Secretary of State**  
**CC8489963707****Current Principal Place of Business:**11784 WEST SAMPLE ROAD  
SUITE 103  
CORAL SPRINGS, FL 33065**Current Mailing Address:**11784 WEST SAMPLE ROAD  
SUITE 103  
CORAL SPRINGS, FL 33065 US**FEI Number: 65-0026953****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**UNITED COMMUNITY MANAGEMENT CORP.  
11784 WEST SAMPLE ROAD  
SUITE 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	P
Name	BARTEN, RICHARD
Address	22799-G TRELAWNY TERRACE
City-State-Zip:	BOCA RATON FL 33433

Title	VP
Name	SAYLES, MARCIA
Address	22760-E MANDERVILLE PLACE
City-State-Zip:	BOCA RATON FL 33433

Title	T
Name	KRUGMAN, LENORE
Address	6738-G MONTEGO BAY BLVD
City-State-Zip:	BOCA RATON FL 33433

Title	D
Name	BROWN, ARMIN
Address	22759-A MANEVILLE PLACE
City-State-Zip:	BOCA RATON FL 33433

Title	D
Name	ROSEN, BURT
Address	6730-B MONTEGO BAY BLVD
City-State-Zip:	BOCA RATON FL 33433

Title	D
Name	BROWN, ARMIN
Address	22759-A MANEVILLE PLACE
City-State-Zip:	BOCA RATON FL 33433

Title	D
Name	ROSEN, BURT
Address	6730-B MONTEGO BAY BLVD
City-State-Zip:	BOCA RATON FL 33433

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: RICHARD BARTEN****P****03/31/2014**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date