

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24438

Entity Name: MONTEGO BAY AT BOCA POINTE PROPERTY OWNERS ASSOCIATION, INC.**FILED**
Feb 20, 2017
Secretary of State
CC2536079121**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	D
Name	BARTEN, RICHARD
Address	22799-G TRELAWNY TERRACE
City-State-Zip:	BOCA RATON FL 33433

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

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

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

Title	T
Name	FRANKEL, LAUREL
Address	6751 MONTEGO BAY BLVD.
City-State-Zip:	BOCA RATON FL 33433

Title	VP
Name	ROSEN, BURT
Address	6730-B MONTEGO BAY BOULEVARD
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: MARCIA SAYLES**P****02/20/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date