

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N34137

**Entity Name:** BOCA SPRINGS ASSOCIATION, INC.**Current Principal Place of Business:**10349 SUN STREAM LANE  
BOCA RATON, FL 33428**Current Mailing Address:**CREST MANAGEMENT GROUP  
6413 CONGRESS AVENUE SUITE 100  
BOCA RATON, FL 33487 US**FEI Number:** 65-0163218**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WASSERSTEIN, P.A.  
301 YAMATO ROAD  
SUITE 2199  
BOCA RATON, FL 33431 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	PRESIDENT
Name	RHODES, ROBERT
Address	CREST MANAGEMENT GROUP 6413 CONGRESS AVENUE SUITE 100
City-State-Zip:	BOCA RATON FL 33487

Title	DIRECTOR
Name	STONELAKE, JOYCE
Address	CREST MANAGEMENT GROUP 6413 CONGRESS AVENUE SUITE 100
City-State-Zip:	BOCA RATON FL 33487

Title	VP
Name	LUTZ, SAMANTHA
Address	CREST MANAGEMENT GROUP 6413 CONGRESS AVENUE SUITE 100
City-State-Zip:	BOCA RATON FL 33487

Title	TREASURER
Name	OLIVEIRA, GUTEMBERG
Address	CREST MANAGEMENT GROUP 6413 CONGRESS AVENUE SUITE 100
City-State-Zip:	BOCA RATON FL 33487

Title	SECRETARY
Name	CIRILLO, ANTHONY
Address	CREST MANAGEMENT GROUP 6413 CONGRESS AVENUE SUITE 100
City-State-Zip:	BOCA RATON FL 33487

*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 RHODES****PRESIDENT****04/01/2021**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date