

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002468

Entity Name: BOCA RATON AMATEUR RADIO ASSOCIATION, INC.**Current Principal Place of Business:**10875 WEST ATLANTIC AVE
DELRAY BEACH, FL 33446**Current Mailing Address:**P.O. BOX 480162
DELRAY BEACH, FL 33448-0162 US**FEI Number:** 65-0666979**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RATOFF, BRUCE ROBERT
22147 FLOWER DRIVE
BOCA RATON, FL 33428 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:** BRUCE ROBERT RATOFF

04/05/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VICE PRESIDENT
Name MELE, RALPH
Address 717 SAINT ALBANS DRIVE
City-State-Zip: BOCA RATON FL 33486

Title DIRECTOR
Name SINTCHAK, GEORGE
Address 287 CAPRI F
City-State-Zip: DELRAY BEACH FL 33484

Title DIRECTOR
Name ZAZA, GENNARO
Address 10683 SHADY POND LN
City-State-Zip: BOCA RATON FL 33428

Title DIRECTOR
Name STAHL, JEFFREY
Address 6099 NW 80 TERR
City-State-Zip: PARKLAND FL 33067

Title PRESIDENT
Name RATOFF, BRUCE
Address 22147 FLOWER DR
City-State-Zip: BOCA RATON FL 33428

Title TREASURER
Name GREENFELD, BONNIE
Address 7022 AVILA TERRACE WAY
City-State-Zip: DELRAY BEACH FL 33446

Title SECRETARY
Name GREENFELD, MICHAEL
Address 7022 AVILA TERRACE WAY
City-State-Zip: DELRAY BEACH FL 33446

Title DIRECTOR
Name ALFONSO, LOU
Address 9182 ISLES CAY DRIVE
City-State-Zip: DELRAY BEACH FL 33446

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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: BRUCE ROBERT RATOFF

PRESIDENT

04/05/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SILVERMAN, JAY
Address 9124 FLYYN CIR
#6
City-State-Zip: BOCA RATON FL 33496

Title DIRECTOR
Name COLE, JOHN
Address 14426 AMBERLY LN
#405
City-State-Zip: DELRAY BEACH FL 33446