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May 21 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 713687 (2)
1. Corporation Name
BOCA ATLANTIC HOME OWNERS' ASSOCIATION, INC.



Principal Place of Business Mailing Address
P. O. BOX 112 P. O. BOX 112
BOCA RATON FL 33432 BOCA RATON FL 33432
US US

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip Country 29 Zip Country
24 25 29 30

3. Date Incorporated or Qualified
11/22/1967
4. FEI Number 23-7064562 Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? ☒ Yes ☐ No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
WARD, JEANNE S.
428 PLAZA REAL
SUITE 414
BOCA RATON FL 33432

10. Name and Address of New Registered Agent
81 Name Thomas Vinci PhD
82 Street Address (P.O. Box Number is Not Acceptable) 700 S. OCEAN BLVD - Suite 1201
83
84 City Boca Raton FL 85 Zip Code 33432

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Jeanne S. Ward, President
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS
TITLE PD
NAME WARD, JEANNE S
STREET ADDRESS 428 PLAZA REAL #414
CITY-ST-ZIP BOCA RATON FL
TITLE TD
NAME BURI, ROY
STREET ADDRESS 2000 S. OCEAN BLVD., #15C
CITY-ST-ZIP BOCA RATON FL
TITLE SD
NAME NEALE, PATRICIA
STREET ADDRESS 901 EAST CAMINO REAL, #11B
CITY-ST-ZIP BOCA RATON FL
TITLE VD
NAME VINCI, PHD THOMAS
STREET ADDRESS 700 S OCEAN BLVD
CITY-ST-ZIP BOCA RATON FL
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE VICE PRESIDENT-DIRECTOR
1.2 NAME JEANNE S. WARD
1.3 STREET ADDRESS 428 PLAZA REAL - Apt 414
1.4 CITY-ST-ZIP BOCA RATON, FL 33432
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE PRESIDENT - DIRECTOR
4.2 NAME VINCI, THOMAS
4.3 STREET ADDRESS 700 S OCEAN BLVD #1201
4.4 CITY-ST-ZIP BOCA RATON FL 33432
5.1 TITLE 2nd VICE PRESIDENT - DIRECTOR
5.2 NAME EUGENE BLOND
5.3 STREET ADDRESS 600 S OCEAN BLVD #304
5.4 CITY-ST-ZIP BOCA RATON, FL 33432
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Jeanne S. Ward JEANNE S. WARD 5/1/98

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