## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#723892** 

FILED Jan 14, 2009 Secretary of State

Entity Name: FEDERATION OF BOCA RATON HOMEOWNER ASSOCIATIONS, INC.

**Current Principal Place of Business: New Principal Place of Business:** 2558 NW 63RD STREET BOCA RATON, FL 33496 US **Current Mailing Address: New Mailing Address:** 2558 NW 63RD STREET BOCA RATON, FL 33496 US FEI Number: 20-0120974 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BAUMANN, LINDA B 2558 NW 63RD STREET US BOCA RATON, FL 33496 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition PAUL, CARMAN GENE, FOLDEN Name: Name: 847 FORSYTH STREET Address: 800 NE 39TH STREET Address: City-St-Zip: BOCA RATON, FL 33496 City-St-Zip: BOCA RATON, FL 33431 Title: Title: ( ) Delete () Change () Addition LINDA, BAUMANN Name: Name: Address: 2558 NW 63RD STREET Address: City-St-Zip: BOCA RATON, FL 33496 City-St-Zip: Title: SEC () Delete Title: SEC (X) Change ( ) Addition FREUDENBERG, DAVID CHEREPY, CHRISTINE Name: Name: Address: 3735 VICTORIA WAY Address: 510 KAY TERRACE City-St-Zip: BOCA RATON, FL 33434 City-St-Zip: BOCA RATON, FL 33432 Title: ( ) Delete Title: () Change () Addition Name: BENEFIELD, BRUCE Name: Address: 850 NE 71ST ST Address: City-St-Zip: BOCA RATON, FL 33487 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition RASMUSSEN, TARINA CARMAN, PAUL Name: Name: 710 APPLEBY STREET 847 FORSYTH STREET Address: Address: City-St-Zip: BOCA RATON, FL 33487 City-St-Zip: BOCA RATON, FL 33487 Title: () Delete Title: () Change () Addition HAYNIE. NEIL Name: Name: Address: 800 CYPRESS WAY Address: BOCA RATON, FL 33486 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LINDA BAUMANN MRS 01/14/2009