
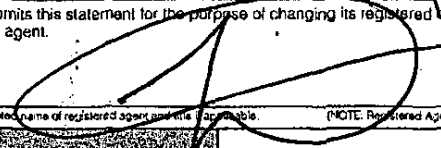
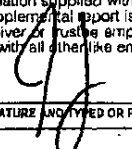


**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

04-26-2004 90435 047 ****61.25
730314

DOCUMENT # 730314				FILED MAY 24 AM 7:58 SECRETARY OF STATE TALLAHASSEE, FLORIDA REINSTATEMENT 94064702 03-04	
1. Entity Name BOCA Towne Centre Owners Assoc					
DO NOT WRITE IN THIS SPACE					
2. Principal Place of Business 4250 NW 9th Ave		3. Mailing Address			
Suite, Apt. #, etc. Ste C		Suite, Apt. #, etc.			
City & State Pompano Beach FL		City & State		4. FEI Number 39-1572921	
Zip 33064		Country USA		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required			
DO NOT WRITE IN THIS SPACE					
7. Name and Address of Current Registered Agent					
Name Gray Palombi 90 RMC					
Street Address (P.O. Box Number if Applicable) 4250 NW 9th Ave					
Ste C					
City & State Pompano Beach FL		Zip Code 33064			
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE 		400037761564 06/08/04--01031--001 **297.50 DATE			
FEES: \$61.25 Initial of Amended UBR		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP			
P Jerry Ligon 2600 Spanish River Blvd BOCA RATON FL 33492		TITLE NAME STREET ADDRESS CITY-ST-ZIP			
Maura Garabanti 14N Chatsworth Ave LARCHMONT NY 10638 7F		TITLE NAME STREET ADDRESS CITY-ST-ZIP			
VP Eric Martin 600 SW 2nd Ave BOCA RATON FL 33432 E155		DO NOT WRITE IN THIS SPACE			
D Teresa Zimmerman 600 SW 2nd Ave D157 BOCA RATON FL 33492					
D Golam Hassan 470 NE 43 St BOCA RATON FL 33491					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. 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 report or supplemental 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 10 or on an attachment with an address, with all other like empowered.					
SIGNATURE: 		Date April 12, 2004			

CR2E037B (12/02)