2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Nov 17, 2009 **DOCUMENT# 738155** Secretary of State

Entity Name: COURTSIDE AT BOCA WEST CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 778 SOUTH MILITARY TRAIL 20540 COUNTRY CLUB BLVD DEERFIELD BEACH, FL 33442 US #101 BOCA RATON, FL 33434 **Current Mailing Address: New Mailing Address:** PO BOX 97-0069 P. O. BOX 97-0069 BOCA RATON, FL 334970069 US FEI Number: 59-1797531 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: PALOMBI, GARL L PALOMBI, GARL L 778 SOUTH MILITARY TRIAL 20540 COUNTRY CLUB BLVD DEERFIELD BEACH, FL 33442 US #101 BOCA RATON, FL 33434 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: 11/17/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition GREENO, RICHARD Name: Name: 20356 BOCA WEST DRIVE #1504 Address: Address: City-St-Zip: BOCA RATON, FL 33433 City-St-Zip: Title: Title: () Delete () Change () Addition Name: LUNN, JOHN Name: Address: 20281 BOCA WEST DR. #2201 Address: City-St-Zip: BOCA RATON, FL 33434 City-St-Zip: Title: () Delete Title: () Change () Addition CUZZONE, CHERYL Name: Name: 20337 BOCA WEST DR, #1802 Address: Address: City-St-Zip: BOCA RATON, FL City-St-Zip: Title: () Delete Title: () Change () Addition Name: SCHENCK, RALPH Name: Address: 20265 BOCA WEST DR 2401 Address: City-St-Zip: BOCA RATON, FL 33434 City-St-Zip: Title: Title: (X) Delete

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.

Name:

Address:

City-St-Zip:

SIGNATURE: GARY PALOMBI MA 11/17/2009

SARFATI, JEFFERY

BOCA RATON, FL 33434

20265 BOCA WEST DR # 2102

Name:

Address: City-St-Zip: () Change () Addition