

FILE NOW: FILING FEE IS \$61.25

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Apr 27 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **739829** (0)

BOXWOOD TERRACE ASSOCIATION, INC.



Principal Place of Business	Mailing Address
4215 SOUTH OCEAN BLVD. HIGHLAND BCH FL 33487 US	4215 SOUTH OCEAN BLVD. HIGHLAND BCH FL 33487 US

3. Date Incorporated or Qualified	08/04/1977
4. FEI Number	59-1781242
Applied For	Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 <i>DANES</i>	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip	Country
24	30

5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent	
BLAKE, ROBERT J 4215 S OCEAN BLVD #15 HIGHLAND BCH FL 33487	

10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL 85 Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstalling) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KELLEY, GORDEN	1.2 NAME	
STREET ADDRESS	4215 S OCEAN BLVD #10	1.3 STREET ADDRESS	
CITY-ST-ZIP	HIGHLAND BCH FL	1.4 CITY-ST-ZIP	
TITLE	RD <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	STNER, RICHARD	2.2 NAME	SECY TREAS
STREET ADDRESS	4215 S OCEAN BLVD #8	2.3 STREET ADDRESS	VOELLEN DESALVO
CITY-ST-ZIP	HIGHLAND BCH FL	2.4 CITY-ST-ZIP	32 GRANGE RD.
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	FLICK GROVE VILLAGE, IL 60007
NAME	HANSEN, NORMAN	3.2 NAME	PRESIDENT
STREET ADDRESS	4215 S OCEAN BLVD #7	3.3 STREET ADDRESS	SAME
CITY-ST-ZIP	HIGHLAND BCH FL	3.4 CITY-ST-ZIP	
TITLE	PD <input type="checkbox"/> DELETE	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLAKE, ROBERT	4.2 NAME	ASST. TREAS. & DIRECTOR
STREET ADDRESS	4215 S OCEAN BLVD #15	4.3 STREET ADDRESS	SAME
CITY-ST-ZIP	HIGHLAND BEACH FL	4.4 CITY-ST-ZIP	
TITLE	VPD <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ANDERSEN, JAS E	5.2 NAME	
STREET ADDRESS	4215 S OCEAN BLVD #14	5.3 STREET ADDRESS	
CITY-ST-ZIP	HIGHLAND BEACH FL	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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: *Robert J Blake* 4/18/98 541-272-4881

CR2E037 (10/97)