

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740921

FILED
Aug 31, 2004
Secretary of State

Entity Name: BOCA TIERRA HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 6207
BOCA RATON, FL 334276207

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 6207
BOCA RATON, FL 334276207

New Mailing Address:

FEI Number: 59-1938443

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NORTH, GLORIA O
2300 GLADES ROAD, #203-E
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

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:

Title: STD () Delete
Name: MATTLIN, BOBBIE,
Address: 4299 NW 26TH COURT
City-St-Zip: BOCA RATON, FL

Title: PD () Delete
Name: JACOBS, PAUL
Address: 4277 NW 26TH WAY
City-St-Zip: BOCA RATON, FL 33432

Title: DVP () Delete
Name: SIEGEL, STUART
Address: 2790 NW 44TH STREET
City-St-Zip: BOCA RATON, FL

Title: DVP () Delete
Name: GOLDIN, BARRY
Address: 4300 NW 28TH AVENUE
City-St-Zip: BOCA RATON, FL 33434

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PAUL JACOBS

PD

08/31/2004

Electronic Signature of Signing Officer or Director

Date