
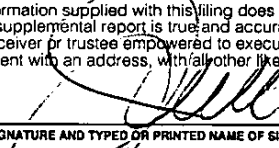


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2005 8:00 am
Secretary of State

04-11-2005 90144 011 ****61.25

DOCUMENT # 747085 1. Entity Name BOCA CLUB COLONY ASSOCIATION, INC.					
Principal Place of Business 23236 BOCA CLUB COLONY CIR BOCA RATON, FL 33433-3938 US			Mailing Address 23236 BOCA CLUB COLONY CIR BOCA RATON, FL 33433-3938 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0143273	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent GATOR MANAGEMENT OF SO. FL. 615 EMERALD WAY EAST DEERFIELD BEACH, FL 33442				7. Name and Address of New Registered Agent Name Joseph Mink Street Address (P.O. Box Number is Not Acceptable) 23189 Boca club colony circle BOCA RATON City FL Zip Code 33433	
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		Signature, typed or printed name of registered agent and title if applicable. PRESIDENT		DATE 04/04/05	
Filing Fee is \$61.25 Due by May 1, 2005		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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	P	<input checked="" type="checkbox"/> Delete	TITLE	V-P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WHITE, CLAUDIA		NAME	SHORE, PATRICIA	
STREET ADDRESS	23177 BOCA CLUB COLONY CIR		STREET ADDRESS	23109 Boca club colony cir.	
CITY-ST-ZIP	BOCA RATON, FL 33433		CITY-ST-ZIP	BOCA RATON FL. 33433	
TITLE	SD	<input checked="" type="checkbox"/> Delete	TITLE	TREASURER	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ZEITLIN, JEFF		NAME	SARKISIAN, JOSEPH	
STREET ADDRESS	23125 BOCA CLUB COLONY CIR.		STREET ADDRESS	23197 Boca club colony circle -	
CITY-ST-ZIP	BOCA RATON, FL 33433		CITY-ST-ZIP	BOCA RATON FL. 33433	
TITLE	TD	<input checked="" type="checkbox"/> Delete	TITLE	SEC	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RADER, KEVIN		NAME	LIPPY STEPHEN	
STREET ADDRESS	23173 BOCA CLUB COLONY CIR		STREET ADDRESS	23265 Boca club colony cir.	
CITY-ST-ZIP	BOCA RATON, FL 33433		CITY-ST-ZIP	BOCA RATON FL. 33433	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MCCORMACK, GENE		NAME	LAWLOR PAT	
STREET ADDRESS	23245 BOCA CLUB COLONY CI.		STREET ADDRESS	23225 Boca club colony cir	
CITY-ST-ZIP	BOCA RATON, FL 33433		CITY-ST-ZIP	BOCA RATON FL. 33433	
TITLE	D	<input type="checkbox"/> Delete	TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MINK, JOE		NAME	MINK, JOE	
STREET ADDRESS	23189 BOCA CLUB COLONY CIR		STREET ADDRESS	23189 Boca club colony cir.	
CITY-ST-ZIP	BOCA RATON, FL 33433		CITY-ST-ZIP	BOCA RATON FL. 33433	
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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 Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 			03/20/05 5613383828		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		