

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 12, 2006 8:00 am**  
**Secretary of State**

01-12-2006 90193 001 \*\*\*\*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

01062006 Chg-NP CR2E037 (11/05)

4. FEI Number  
**65-0143273**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MINK, JOSEPH  
23189 BOCA CLUB COLONY CIRCLR  
BOCA RATON, FL 33433**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$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 **VD** ☐ Delete  
NAME **SHORE, PATRICIA**  
STREET ADDRESS **23109 BOCA CLUB COLONY CIR**  
CITY-ST-ZIP **BOCA RATON, FL 33433**

TITLE **President** ☒ Change ☐ Addition  
NAME **Shore, Patricia**  
STREET ADDRESS **23109 Boca Club Colony Circle**  
CITY-ST-ZIP **Boca Raton, FL 33433**

TITLE **TD** ☐ Delete  
NAME **SARKISSIAN, JOSEPH**  
STREET ADDRESS **23197 BOCA CLUB COLONY CIR**  
CITY-ST-ZIP **BOCA RATON, FL 33433**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **SD** ☒ Delete  
NAME **LIPPY, STEPHEN**  
STREET ADDRESS **23265 BOCA CLUB COLONY CIR**  
CITY-ST-ZIP **BOCA RATON, FL 33433**

TITLE **SD** ☐ Change ☒ Addition  
NAME **Schreibman, Amy**  
STREET ADDRESS **23201 Boca Club Colony Circle**  
CITY-ST-ZIP **Boca Raton, FL 33433**

TITLE **D** ☒ Delete  
NAME **LAWLOR, PAT**  
STREET ADDRESS **23225 BOCA CLUB COLONY CIR**  
CITY-ST-ZIP **BOCA RATON, FL 33433**

TITLE **D** ☐ Change ☒ Addition  
NAME **Golan, Eliahue**  
STREET ADDRESS **23113 Boca Club Colony Circle**  
CITY-ST-ZIP **Boca Raton FL 33433**

TITLE **PD** ☐ Delete  
NAME **MINK, JOE**  
STREET ADDRESS **23189 BOCA CLUB COLONY CIR**  
CITY-ST-ZIP **BOCA RATON, FL 33433**

TITLE **VICE President** ☒ Change ☐ Addition  
NAME **mink, Joe**  
STREET ADDRESS **23189 Boca Club Colony Cir**  
CITY-ST-ZIP **Boca Raton FL 33433**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:**

*Joseph Sarkissian*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**JOSEPH SARKISSIAN - TREAS**

**1-7-06 (561) 393-7487**

Date Daytime Phone #