

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2004 8:00 am
Secretary of State

02-11-2004 90038 008 ****61.25

DOCUMENT # 747114 1. Entity Name THE PATIOS OF BOCA BARWOOD CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 9170 SW 14TH ST. BOCA RATON, FL 33428-6801				Mailing Address 9170 SW 14TH ST. BOCA RATON, FL 33428-6801	
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 59-1985177	
				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		
ROBERT KAYE & ASSOCIATED, INC. 6261 NW 6 WAY SUITE 103 FORT LAUDERDALE, FL 33309			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, 2004		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 NAME STREET ADDRESS CITY-ST-ZIP	P PAGANO, JAMES 9165 SW 14TH STREET #1507 BOCA RATON, FL		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR ADLER, NATE 9220 SW 14 STREET #13501 BOCA RATON FL 33428	
	☐ Delete			☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GOLD, ALEX 9260 S.W. 14TH ST., #2502 BOCA RATON, FL 33428		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR GRECO, JOHN 9170 SW 14 STREET #4505 BOCA RATON FL 33428	
	☐ Delete			☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRAY, RICHARD 9170 SW 14 ST. #4504 BOCA RATON, FL 33428		TITLE NAME STREET ADDRESS CITY-ST-ZIP		
	☒ Delete			☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T RICCI, AL 9165 SW 14TH STREET #1207 BOCA RATON, FL		TITLE NAME STREET ADDRESS CITY-ST-ZIP		
	☐ Delete			☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BLOOM, HERMAN 9165 SW 14TH STREET, #1309 BOCA RATON, FL 33428		TITLE NAME STREET ADDRESS CITY-ST-ZIP		
	☐ Delete			☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FIORIELLO, CARL 9165 SW 14 ST. #1504 BOCA RATON, FL 33428		TITLE NAME STREET ADDRESS CITY-ST-ZIP		
	☐ Delete			☐ Change ☐ Addition	
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: <i>James Pagano</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR JAMES PAGANO			Date 2/2/04 Daytime Phone # 954-344-5353		