

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747114

FILED
Mar 16, 2009
Secretary of State

Entity Name: THE PATIOS OF BOCA BARWOOD CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

9170 SW 14TH ST.
BOCA RATON, FL 334286801

New Principal Place of Business:

Current Mailing Address:

9170 SW 14TH ST.
BOCA RATON, FL 334286801

New Mailing Address:

FEI Number: 59-1985177

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERT KAYE & ASSOCIATED, INC.
6261 NW 6 WAY SUITE 103
FORT LAUDERDALE, FL 33309 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: VP () Delete
Name: FIORELLO, CARL
Address: 9165 SW 14 STREET #1504
City-St-Zip: BOCA RATON, FL 33428

Title: D () Delete
Name: PAGANO, JAMES
Address: 9165 SW 14 STREET
City-St-Zip: BOCA RATON, FL 33428

Title: P () Delete
Name: PAYNOR, STEVE
Address: 9165 S.W 14 ST.
City-St-Zip: BOCA RATON, FL 33428

Title: D () Delete
Name: SADEIFEILD, THOMAS
Address: 9260 SW 14TH STREET
City-St-Zip: BOCA RATON, FL 33428

Title: S () Delete
Name: CAMIS, ILSE
Address: 9165 SW 14 ST 1406
City-St-Zip: BOCA RATON, FL 33428

Title: D () Delete
Name: GRECO, JOHN
Address: 9170 SW. 14ST 4505
City-St-Zip: BOCA RATON, FL 33428

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: LAZZARO, SALVATORE
Address: 9260 SW. 14 STREET #2102
City-St-Zip: BOCA RATON, FL 33428

Title: P (X) Change () Addition
Name: FAYNOR, STEVE
Address: 9165 S.W 14 ST.
City-St-Zip: BOCA RATON, FL 33428

Title: T (X) Change () Addition
Name: HOUSE, GARY
Address: 9220 SW 14 STREET 3101
City-St-Zip: BOCA RATON, FL 33428

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 exemption stated 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 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: S. FAYNOR

P

03/16/2009

Electronic Signature of Signing Officer or Director

Date