

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755394

FILED
Mar 25, 2009
Secretary of State

Entity Name: BOCA HILL TOWNHOUSE CONDOMINIUM ASSOCIATION, INC

Current Principal Place of Business:

N, INC.
901 SOUTHWEST FOURTH AVE.
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

901 SW FOURTH AVE
#B2
BOCA RATON, FL 334325821 US

New Mailing Address:

N, INC.
901 SOUTHWEST FOURTH AVE.
BOCA RATON, FL 33432

FEI Number: 59-2069584

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOOLIN, CONSTANCE PRE
901 SW 4TH AVE B2
BOCA RATON, FL 33432 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: SD () Delete
Name: ROGERS, CINDY
Address: 901 SW 4TH AVE. B3
City-St-Zip: BOCA RATON, FL 33432

Title: VD () Delete
Name: GAIL, HENRY
Address: 901 SW 4TH AVE A1
City-St-Zip: BOCA RATON, FL 33432

Title: TD () Delete
Name: DOOLIN, CONSTANCE
Address: 901 SW 4TH AVE. B2
City-St-Zip: BOCA RATON, FL 33432

Title: PD () Delete
Name: JONATHAN, WHITNEY
Address: 901 SW 4TH AVE B1
City-St-Zip: BOCA RATON, FL 33432

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 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: CONSTANCE DOOLIN

TD

03/25/2009

Electronic Signature of Signing Officer or Director

Date