

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 17, 2003 8:00 am
Secretary of State

02-17-2003 90243 036 ****61.25

DOCUMENT # 756809

1. Entity Name
BOCA CERRO CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**260 NW 19TH ST.
BOCA RATON FL 33432**

Mailing Address
**260 NW 19TH ST.
BOCA RATON FL 33432**

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 **59-2168634**

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

**KRUSE, PAM
260 NW 19TH ST #3
BOCA RATON FL 33432**

Name **Janet Kile Prosser**

Street Address (P.O. Box Number is Not Acceptable)
260 N.W. 19th St. #9

City **Boca Raton,**

FL

Zip Code
33432

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

Janet Kile Prosser, Secretary Treasurer

2-7-03

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

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 **P** ☐ Delete
NAME **WISNER, ROBERT**
STREET ADDRESS **84 BUXTON LANE**
CITY-ST-ZIP **LAKE WORTH FL 33462**

TITLE **President** ☐ Change ☐ Addition
NAME **WISNER, Robert**
STREET ADDRESS **84 Buxton Lane**
CITY-ST-ZIP **Boynton Beach, Fl. 33462**

TITLE **DVP** ☒ Delete
NAME **WAHNER, HERMAN**
STREET ADDRESS **260 NW 19TH ST 7**
CITY-ST-ZIP **BOCA RATON FL**

TITLE **DVP** ☒ Change ☐ Addition
NAME **Queen, Gerard**
STREET ADDRESS **260 N.W. 19th St. #21**
CITY-ST-ZIP **Boca Raton, Fl. 33432**

TITLE **SD** ☐ Delete
NAME **PROSSER, JAN**
STREET ADDRESS **260 NW 19TH ST #9**
CITY-ST-ZIP **BOCA RATON FL**

TITLE **S/T D** ☐ Change ☐ Addition
NAME **Janet Kile Prosser**
STREET ADDRESS **260 N.W. 19th St. #9**
CITY-ST-ZIP **Boca Raton, Fl. 33432**

TITLE **TD** ☒ Delete
NAME **KRUS, PAM**
STREET ADDRESS **260NW 19TH ST 3**
CITY-ST-ZIP **BOCA RATON FL 33432**

TITLE **Janet Kile Prosser** ☒ Change ☐ Addition
NAME **Janet Kile Prosser**
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **WISNER, BETTY**
STREET ADDRESS **84 BUXTON LN.**
CITY-ST-ZIP **BOYNTON BEACH FL 33426**

TITLE **D** ☐ Change ☐ Addition
NAME **Wisner, Betty**
STREET ADDRESS **84 Buxton Lane**
CITY-ST-ZIP **Boynton Beach, Fl. 33426**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Change ☒ Addition
NAME **Bass, Gail**
STREET ADDRESS **22816 Ponderosa Drive**
CITY-ST-ZIP **Boca Raton, Fl. 33428**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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:

Janet Kile Prosser

2/7/03

561-395-0529

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/02)