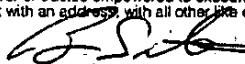
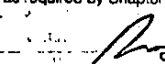
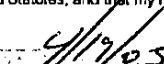


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2005 8:00 am
Secretary of State

03-23-2005 90219 001 ****30.62
03-23-2005 90219 002 ****30.63

DOCUMENT # 759312			
1. Entity Name EXECUTIVE COURT CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 2295 CORPORATE BLVD., N.W. BOCA RATON, FL 33431 US		Mailing Address 21045 COMMERCIAL TRAIL BOCA RATON, FL 33486 US	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip		Zip	
Country		Country	
33431		Palm Bch	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
ROGOR, RANDALL K 621 NW 53RD ST STE 300 BOCA RATON, FL 33487		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 _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when rechartering)			
Filing Fee is \$61.25 Due by May 1, 2005		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			
TITLE	P	☐ Delete	
NAME	WINTER, BRUCE		
STREET ADDRESS	2300 CORPORATE BLVD. NW		
CITY-ST-ZIP	BOCA RATON, FL 33431		
TITLE	D	☐ Delete	
NAME	SEVELL, ARNOLD		
STREET ADDRESS	2295 CORPORATE BLVD NW		
CITY-ST-ZIP	BOCA RATON, FL 33431		
TITLE	D	☐ Delete	
NAME	ALLEN, WILLIAM		
STREET ADDRESS	2295 CORPORATE BLVD. NW		
CITY-ST-ZIP	BOCA RATON, FL		
TITLE	D	☐ Delete	
NAME	CORRGLES, PETER		
STREET ADDRESS	2300 CORPORATE BLVD NW		
CITY-ST-ZIP	BOCA RATON, FL 33431		
TITLE	D	☐ Delete	
NAME	UTRECHT, STEVE		
STREET ADDRESS	2295 CORPORATE BLVD NW		
CITY-ST-ZIP	BOCA RATON, FL 33431		
TITLE		☐ Delete	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE		☐ Change ☐ Addition	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		☐ Change ☐ Addition	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		☐ Change ☐ Addition	
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 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:    4/19/05			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			