

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 761013

1. Entity Name

WATERSIDE AT BOCA TRAIL COMMUNITY ASSOCIATION, I

FILED
Jan 26, 2000 8:00 am
Secretary of State

01-26-2000 90024 040 ****61.25

Principal Place of Business RMC, INC BOCA RATON FL 33486 US	Mailing Address 23123 STATE RD 7 STE 350A BOCA RATON FL 33428-5470 US
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DO NOT WRITE IN THIS SPACE

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 59-2280794	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

RESIDENTIAL MANAGEMENT CONCEPTS
23123 STATE RD 7
STE 350A
BOCA RATON FL 33428

7. Name and Address of New Registered Agent

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.

SIGNATURE _____
 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
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	BLITSTEIN, SHARON	
STREET ADDRESS	23459 WATER CIR	
CITY-ST-ZIP	BOCA RATON, FL 00000 33496	
TITLE	VPS	<input type="checkbox"/> Delete
NAME	DELKER, VIRGINIA	
STREET ADDRESS	23256 WATER CIR	
CITY-ST-ZIP	BOCA RATON, FL 00000 33496	
TITLE	PD	<input type="checkbox"/> Delete
NAME	TERRANOVA, SAL	
STREET ADDRESS	23345 WATER CIR	
CITY-ST-ZIP	BOCA RATON FL 33486	
TITLE	SD	<input type="checkbox"/> Delete
NAME	TANK, LINDA	
STREET ADDRESS	23305 WATER CIR	
CITY-ST-ZIP	BOCA RATON FL 33486	
TITLE	TD	<input type="checkbox"/> Delete
NAME	AMBRUST, ELENA	
STREET ADDRESS	23309 WATER CIR	
CITY-ST-ZIP	BOCA RATON FL 33486	
TITLE	D	<input type="checkbox"/> Delete
NAME	GILBERT, GINGER	
STREET ADDRESS	23363 WATER CIR	
CITY-ST-ZIP	BOCA RATON FL 33486	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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: *Sharon Blitstein*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____ Daytime Phone # _____

CR2E037 (9/99)