

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765564

FILED
Mar 19, 2009
Secretary of State

Entity Name: THE CENTRE OF BOCA BARWOOD HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2200 NORTH FEDERAL HIGHWAY
SUITE 212
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

2200 NORTH FEDERAL HIGHWAY
SUITE 212
BOCA RATON, FL 33431

New Mailing Address:

FEI Number: 59-2234660

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PLAZURE, LENNIE
2200 NORTH FEDERAL HIGHWAY
SUITE 212
BOCA RATON, FL 33431 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: D () Delete
Name: PLANTAMURA, JOE
Address: 23155-C BARWOOD PK LN
City-St-Zip: BOCA RATON, FL 33433

Title: PD () Delete
Name: REHARD, TAMERA
Address: 23145-B BARWOOD PK LN
City-St-Zip: BOCA RATON, FL 33433

Title: S D () Delete
Name: DIMAGGIO, PAT
Address: 23155-A BARWOOD PARK LANE
City-St-Zip: BOCA RATON, FL 33433

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PLANTAMURA, JOE
Address: 2200 NORTH FEDERAL HIGHWAY
City-St-Zip: BOCA RATON, FL 33431

Title: PD (X) Change () Addition
Name: REHARD, TAMERA
Address: 2200 NORTH FEDERAL HIGHWAY
City-St-Zip: BOCA RATON, FL 33431

Title: S D (X) Change () Addition
Name: DIMAGGIO, PAT
Address: 2200 NORTH FEDERAL HIGHWAY
City-St-Zip: BOCA RATON, FL 33431

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: TAMERA REHARD

PD

03/19/2009

Electronic Signature of Signing Officer or Director

Date