FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

768210

(7)

1. Corporation Name				
BOCA RIDGE PARK CONDOMINIUM ASSOCIATION, INC.				·
)				E ARRAINE ARRAINE BARRA BARRA HONDO HARRAI (ARRAIN BARRAIN BARRAIN BARRAIN BARRAIN BARRAIN BARRAIN BARRAIN BARR
<u> </u>		14 (6) 144		
Principal Place	e of Business	Mailing Address		
C/O ARISTA MANAGEMENT C/O ANISTA MANAGEMENT			3. Date Incorporated or Qualified	
151 N.W. 18TH AVE. 151 N.W. 18TH AVE DELRAY BEACH FL 33444			05/02/1983	
US	712 33777	US		4. FEI Number Applied For
9 Dringing D	late of Business /	Pa. Malling Address		59-2499544 Not Applicable
2//	Pointe Management			5. Certificate of Status Desired See Required Fee Required
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Will -	6. Election Campaign Financing \$5.00 May Be
22 7540	U.S. Hoy 1 # 104	27 - 3/		Trust Fund Contribution Added to Fees
City & State	The standard	City & State		7. Is this nonprofit corporation a homeowners association?
23/ AIN TI	AMA, TIPAN	28		Yes [_] No
Zip 3 34	147- 3 18 800	Zip	Country	This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
24 537 C 25 C 29 30 30 9, Name and Address of Current Registered Agent 10.				Personal Property Tax due June 30. L. Yes L. No 10. Name and Address of New Registered Agent
Bil Name/ L M				
ARISTA MGMT, GROUP				Address (P.O. Box Number is Wol Acceptable)
151 N.W. 18TH AVE.				
STE 23				
DELRAY BEACH FL 33444				85 Zip Code
Lantana FL 33442				
11. Pursuant to the provisions of Sections 617,0502 and 617,1308, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 617.0503, Florida Statutes.				
agent. I am familiar with, and account the obligations of Section 617.0503, Florida Statutes.				
SIGNATURE Signature sparts affred name of registered agent and title if applicable (NOTE: Registered Agent eignature required when				required when reinstating) DATE
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE	PD ///Am Mahoney Change Addition
NAME	SCHOLZ, JULIE PAUL	·	1.2 NAME	9270 Ketay Circle
STREET ADDRESS	9288 KETAY CIRCLE		1.3 STREET ADDRESS	9270 Keruy Criter
CITY-ST-ZIP	BOCA RATON FL	DELETE	1.4 CITY - ST - ZIP	Boca Raton, Florida 33428 Change & Addition
TITLE	TD	LACOELETE	2.1 TITLE 2.2 NAME	Ed Clerena -
NAME STREET ADDRESS !	FREUDENHEIM, NORMAN 9324 KETAY CIRCLE		2.3 STREET ADDRESS	9337 Ketay Cirth
CITY-ST-ZIP	BOCA RATON FL		2.4 CITY-ST-ZIP	Buen Raton Florian 33428
TITLE	D	DELETE	3.1 TITLE	Change Addition
NAME	ULRICH, BOB	• •	3.2 NAME	Villian Chot Ina
STREET ADDRESS	9254 KETAY CIRCLE		3.3 STREET ADDRESS	9320 Ketaylink
CITY-ST-ZIP	BOCA RATON FL 33428		3.4. CITY - ST - ZIP	Bura Roton, Florida 33428
I TITLE		☐ DELETE	4.1 TITLE	Change Addition
NAME			4. 2 NAME	alyde Tempest
STREET ADDRESS			4.3 STREET ADDRESS	93/3 Ketay Clash 32428
CITY-ST-ZIP		☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE	D Change Addition
TITLE NAME		0	5.2 NAME	93/3 Ketay Circle Bills Roten, Florida 33428 Elsie Sayinders 9782 Ketay Circle Boan Ratin Florida 33428
STREET ADDRESS			5.3 STREET ADDRESS	OTAZ Ketay Cinele
CITY-ST-ZIP			5.4 CITY-ST-ZIP	Bona Ratin Florida 33428
TITLE		DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

Making WHILD

3/10/98

FILED

Mar 30 1998 8:00am

Secretary of State