FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED Apr 08, 1999 8:00 am Secretary of State

04-08-1999 90110 020 ****61.25

DOCUMENT #	768210
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1. Corporation Name							
BOCA RIDGE PARK CONDOMINIUN	1 ASSOCIATION, INC.		,				
District Place of Pusings (2)	Mailing Address		- 				
Principal Place of Business (Mailing Address) C/O POINTE MANAGEMENT GROUP 7540 U. S. HWY 1 #104 LANTANA FL 33462 US Mailing Address C/O POINTE MANAGEMENT GROUP 7540 U. S. HWY 1 #104 LANTANA FL 33462 US							
2. Principal Place of Business	2a. Mailing Address		3. Date Incorporated or Qualifed 05/02/1983				
Suite, Apt. #, etc.	Suite, Apt. #, etc.		4. FEI Number 59-2499544	Applied For Not Applicat			
City & State	City & State		5. Certifcate of Status Desired	\$8.75 Additional Fee Required			
Zip Country	Zip C 29 30	ountry	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
9. Name and Address of Curren	t Registered Agent	81 Name	10. Name and Address of New Registere	d Agent			
POINTE MANAGEMENT GROUP INC. 7540 U. S. HWY 1 STE #104 LANTANA FL 33462			ress (P.O. Box Number is Not Acceptable)	85 Zip Code			
11. Pursuant to the provisions of Sections 617.050 office or registered agent, or both, in the State agent. I am familial with and accept the milital SIGNATURE	2 and 617,1508, Florida Statutes, the of Florida. Such change was authorized by Section 617,0003, Florida Statutes of Section 617,0003	above-named corporation		of changing its registered			
Signature, typed a printed name of registered ager		red Agent signature require	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12			
12. OFFICERS AND MAHONEY, WILLIAM STREET ADDRESS 2070 KETAY CIRCLE	DELETE 1.1	3. TITLE V NAME DY		Change Addi			

1340 0. 3			83						
STE #104	The second secon				_				
LANTANA	FL 33462			City	$\overline{}$		FL	85 Z	ip Code
						Alian automont for		hanging	ite registered
11. Pursuant i	to the provisions of Sections 617.0502 and 617,1508 egistered agent, or both, in the State of Flunda, Such	r Florida Statutes, change was auth	the above orized by	s-named the corp	corpori oratien	ation submits this statement for 's board of directors. I hereby at	cept the appoin	tment as	registered
agent-l a	m familia with, and account he or ligations of, Section	1.617.0803, Floride	- Claimee	رجعه ا	/200				ستهجد المستحد
SIGNATURE Stonature, typed or britted name of registered agent and tills (Explicable (NOTE: Registered Agent Signature required when reinstating) DATE									
12.	Signature, typed a printed name of registered agent and title in applicable		13.	t signature r	required w	ADDITIONS/CHANGES TO		DIREC	TORS IN 12
	OFFICERS AND DIRECTORS	DELETE	1.1 TITLE		VΡ		011102110111	Chang	
MLE	PDC CONTRACTOR OF THE POPULATION OF THE POPULATI		1.2 NAME		D. 1	matthew Raw			
NAME	MAHONEY, WILLIAM		1.2 NAME		022	6 Kelon Cuche		•	
STREET ADDRESS	9270 KETAY CIRCLE			ADDRESS	0-	c Raton FU 334	~ Ø ·		
CITY-ST-ZIP	BOCA RATON FL 33428	Nociett -	1.4 CITY-S	T-ZIP	, DE	EKATON FU 334	٠٠٠	Chang	e Addition
MILE	D	DELETE	2.1 TITLE						ge
NAME	LLERENA, ED		2.2 NAME						
STREET ADDRESS	9337 KETAY CIRCLE		2.3 STREE	TADORESS	1				
CITY-ST-ZIP	BOCA RATON FL 33428		2.4 CITY-S	T-ZIP	<u> </u>			TTA 01-	
MTLE	SD	DELETE	3.1 TITLE		700	SONGL!		Chane	ge 🔲 Addition
NAME	CORTINA, LILLIAN		3.2 NAME		Con	tora, Lillian			
STREET ADDRESS	9320 KETAY CIRCLE		3.3 STREE	FADDRESS	537	o Ketuy Cin.	_		
CITY-ST-ZIP	BOCA RATON FL 33428		3.4. CITY-S	IT-ZIP		cc Robbin FL 334	78		
TITLE	TD	DELETE	4.1 TITLE			cretery	`	Chang	ge
NAME	TEMPEST, CLYDE		4. 2 NAME		Ter	rest Clyde			
STREET ADDRESS	9313 KETAY CIRCLE		4.3 STREET	T ADDRESS	1931	13 Ketalica -			
CITY-ST-ZIP	BOCA RATON FL 33428		4.4 CITY-S	T-ZIP	97	Scallation Fl 334	78		
TITLE	D '	☐ DELETE	5.1 TITLE					Chang	ge 🔲 Addition
NAME	SAUNDERS, ELSIE		5.2 NAME						
STREET ADDRESS	9282 KETAY CIRCLE		5.3 STREE	ADDRESS					
CITY-ST-ZIP	BOCA RATON FL 33428		5.4 CITY-S	T-ZIP		· .	•		
IIILE	The state of the s	☐ DELETE	6.1 TITLE					Chang	ge Addition
NAME			6.2 NAME		1				
STREET ADDRESS	• •		6.3 STREE	TADORESS	H				
CITY-ST-ZIP			6.4 CITY-S	T-ZIP					
44 14	00 0 10 10 10 10 10 10 10 10 10 10 10 10	A 116 - 6 Ab			die Co	otion 110 07/3\(ii) Florida Statut	oe I further cort	fu that th	e information

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 informationated 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, often an attachment with an address, with all other like empowered.

SIGNATURE:

CR2E037 (11/98).

Applied For Not Applicable \$8.75 Additional