


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90103 040 ****61.25

DOCUMENT # 770513			
1. Entity Name EL VIENTO AT BOCA POINTE CONDOMINIUM ASSOCIATION NO.1, INC.			
Principal Place of Business UNITED COMMUNITY MGMT. 11784 WEST SAMPLE RD CORAL SPRINGS, FL 33065 US		Mailing Address UNITED COMMUNITY MGMT. 11784 WEST SAMPLE RD CORAL SPRINGS, FL 33065 US	
2. Principal Place of Business - No P.O. Box # Residential Management Concepts Suite, Apt. #, etc. 778 South Military Trail City & State Deerfield Beach FL		3. Mailing Address Po Box 97-0069 Suite, Apt. #, etc. City & State Boca Raton FL	
4. FEI Number 59-2384010		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent UNITED COMMUNITY MANAGEMENT 11784 WEST SAMPLE RD CORAL SPRINGS, FL 33065		7. Name and Address of New Registered Agent Name Gary Palombi Street Address (P.O. Box Number is Not Acceptable) 778 South Military Trail City Deerfield Beach FL Zip Code 33442	
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 <u>Gary Palombi</u> Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE			
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SMITH, NORMA 7924 GRANADA PLACE #201 BOCA RATON, FL 33433 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Richard Hoffman 7930 GRANADA PLACE #304 BOCA RATON FL 33433 <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DERIVERA, LINDA 7906 CORANADA PL #1202 BOCA RATON, FL 33433 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Beatrice Rosensaft 7924 GRANADA PLACE #202 BOCA RATON FL 33433 <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JOHNSON, RUSSELL 7864 CORANADA PL #502 BOCA RATON, FL 33433 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Barbara Rosenblum 7858 GRANADA PLACE #402 BOCA RATON FL 33433 <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BERLINER, RUTH 7906 CORANADA PL #1201 BOCA RATON, FL 33433 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T James Jarosz 7882 GRANADA PLACE #803 BOCA RATON FL 33433 <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP IAROSE, MAUREEN 79 GROVE AVE LEOMINSTER, MA 01453 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Elaine Milrad 7900 GRANADA PLACE #1103 BOCA RATON FL 33433 <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 <u>[Signature]</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date <u>4/20/07</u> Daytime Phone #	