2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Apr 28, 2008 8:00 am Secretary of State **DOCUMENT # 771165** 1. Entity Name 04-28-2008 90373 018 ****61.25 BOCA ENTRADA I CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 10110 BOCA ENTRADA BLVD. BOCA RATON FL 33428 10110 BOCA ENTRADA BLVD #102 BOCA RATON FL 33428-5841 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/07) City & State City & State Applied For 4. FEI Number 59-2355820 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LEVIN, CHERYL J P.A. Street Address (P.O. Box Number is Not Acceptable) COURTYARD BUSINESS CENTER 4694 NW 103RD AVENUE SUNRISE FL 33351-7970 City Zip Code 8. The altove named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fiorida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Aignature, typed or proced name of registered agent and title I applicable. (NOTE: Begistered Agent signature registed when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution Due By May 1, 2008 Added to Fees Florida Department of State: yi kirakkiny 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE Addition ☐ Change GARRITY, KEVIN NAME NAME 10110 BOCA ENTRODEN BLVD STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33428** CITY - ST - ZIP CITY-ST-ZIP TITLE Delate TITLE Addition SEARCY, LARRY NAME NAME 10110 BOCA ENTRADA 402 STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33428-5841** CITY-ST-ZIP CITY-ST-ZIP D + Secretary TITLE ☐ Delete TITLE ☐ Change ☐ Addition BELL, PATRICIA I NAME NAME STREET ADDRESS 10110 BOCA ENTRADA BLVD #102 STREET ADDRESS **BOCA RATON FL 33428** CITY-ST-ZIP CITY-ST-ZIP 797116 ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Delete TITLE Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-Z/P ☐ Delete TITLE TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZiP

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12. I hereby certify that the information supplied with this filing does not quality for the exemptions contained in Section 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 attactment with an address, with all other like empowered.

SIGNATURE: Latricia & Bell tateicia I. Bell 4/2/04 954-254-9729