

File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

98 APR -9 AM 10:00

KL 4/13

**FILING FEE** Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee  
**\$ 188.75** Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address  
of Limited Liability Company

**DOCUMENT #** L97000000220

BOCA PALM ASSOCIATES I, L.C.  
~~2541 N.E. 48TH STREET~~ P.O. BOX 5847  
LIGHTHOUSE POINT FL 33064  
33074

1a. Principal Place of Business Address

~~2541 N.E. 48TH STREET~~  
~~LIGHTHOUSE POINT FL 33064~~

2. Principal Place of Business

3763 NW 4<sup>TH</sup> AVE

Suite, Apt. #, etc.

2a. Mailing Address

P.O. BOX 5847

Suite, Apt. #, etc.

3. Date Organized or Qualified

02/24/1997

3a. State of Formation

FL

4. FEI Number

65-0737181

☐ Applied For

☐ Not Applicable

5. Date of Last Report

NONE (NEW)

6. Certificate of Status Desired

\$8.75 Additional Fee Required ☐

City & State

BOCA RATON, FL

Zip

33431

Country

USA

City & State

LIGHTHOUSE PT, FL 33074

Zip

33074

Country

USA

7. Name and Address of Current Registered Agent

RUKE, MORGAN L

~~2541 N.E. 48TH STREET~~

~~LIGHTHOUSE POINT FL 33064~~

8. Name and Address of New Registered Agent/Office

Name

Street Address (P.O. Box Number is Not Acceptable)

57 FORT ROYAL ISLE

Suite, Apt. #, etc.

City

FT LAUDERDALE

Zip Code

FL

33308

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE

*Morgan L. Rukes*

DATE

4/6/98

(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

10. Title

Managing Members/Managers

Business Street Address

City, State and Zip Code

MGRM RUKES, MORGAN

~~2541 N.E. 48TH STREET~~

57 FORT ROYAL ISLE

MGRM RUKES, ILLEANNE

~~2541 N.E. 48TH STREET~~

57 FORT ROYAL ISLE

MGRM EICHLER, GARY

~~2541 N.E. 48TH STREET~~

591 NE SILVER LAKE

MGRM BRITT, BARBARA

~~2541 N.E. 48TH STREET~~

591 NE SILVER LAKE

~~LIGHTHOUSE POINT FL~~

~~FT LAUDERDALE FL~~

~~LIGHTHOUSE POINT FL~~

~~FT LAUDERDALE FL~~

~~LIGHTHOUSE POINT FL~~

~~BOCA RATON FL 33432~~

~~LIGHTHOUSE POINT FL~~

~~BOCA RATON, FL 33432~~

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\*\*\*\*188.75 \*\*\*\*188.75

11. I do 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE:

*Morgan L. Rukes*

Date

4/6/98

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER