## FILED Apr 16, 2007 8:00 am Secretary of State

ANNUAL REPORT	IION
DOCUMENT # N03577	411

DOCUMENT # N03577  1. Entity Name LA MIRADA AT BOCA POINTE HOMEOWNERS' ASSOCIATION, INC.					04-16-2007 90079 029 ****61.25		
Principal Place of Business C/O PRIME MANAGEMENT GROUP, INC 6300 PARK OF COMMERCE BLVD. BOCA RATON, FL 33487-8290 US  Mailing Address C/O PRIME MANAGEMENT GROUP, INC 6300 PARK OF COMMERCE BL BOCA RATON, FL 33487-8290			RCE BLVD.				
2. Principal F	Place of Business - No P.O. Box #	3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		ng-NP CR2E037 (12/06)	•	
City & Star	te	City & State		4. FEI Number 59-268030	4	Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Sta	atus Desired		
	6. Name and Address of Current	Registered Agent		7. Name and Add	ress of New Registered Agent		
SWATT, N	MYRON'		Name C		-17-er		
C/O PRIM	"TRON" E MANAGEMENT GROUP, IN K OF COMMERCE BLVD.	C	Street Addres	Street Address (P.O. Box Number is Not Acceptable)			
	TON, FL 33487-8290						
			City		FL Zip Co		
8. The above the obligation	e named entity submits this statement fo tions of registered agent.	the purpose of changing its	registered office or regis	tered agent, or both, in	the State of Florida. I am familiar with	n, and accept	
SIGNATURE		and ask is a surface to the same as a second	Paris de la constant				
	Signature, typed or printed name of registered agent	INOTE	: Registered Agent signature requi	red when reinstating)	DATE		
٠	Filing Fee is \$61.25 Due by May 1, 2007	9. Election Carr Trust Fund C	paign Financing ontribution.	\$5.00 May Be Added to Fees	Make check payable Florida Department of S		
10.	_	Trust Fund C		Added to Fees		State	
TITLE	OFFICERS AND DIF	Trust Fund C	ontribution.	Added to Fees	Florida Department of S	N 10	
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TITLE NAME STREET ADDRESS	OFFICERS AND DIF TD KOVES, GABOR 7776 LAMIRADA DR	Trust Fund C	Ontribution.   11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	Added to Fees	Florida Department of SES TO OFFICERS AND DIRECTORS I	State N 10 Addition	
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