2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 28, 2008 8:00 am Secretary of State

DOCUMENT # N04488 1. Entity Name THE PALMS AT BOCA POINTE HOMEOWNERS' ASSOCIATION, INC.				04-28	-2008 90382 047 ****61.25	
Principal Place of Business C/O BENCHMARK PROPERTY MGMT 7932 WILES RD CORA GABLES, FL 33067		Mailing Address C/O BENCHMARK PROPERTY MGMT 7932 WILES RD CORA GABLES, FL 33067				
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			10	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04142008 Chg-NP	CR2E037 (12/06)	
City & State		City & State		4. FEI Number 65-0110568	Applied F Not Appli	
Zip	Country	Zip	Country	5. Certificate of Status De	esired	
	6. Name and Address of Current R	legistered Agent		7. Name and Address o	f New Registered Agent	
			Name			
CAPLAN, LOUIS ESQ. C/O SACHS & SAX 301 YAMATO ROAD - SUITE 4150 BOCA RATON, FL 33431			Street Address (P.O. Box Number is Not Acceptable)			
Booktok	, 6,1,12 66 16 1		City		Zip Code	
			City		FL Zip Code	}
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. If am familiar with, and accept the obligations of registered agent. SIGNATURE						
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Output Description:						
	•			dures and translating,	W-112	
	Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campa Trust Fund Cont	ign Financing	\$5.00 May Be Added to Fees	Make check payable to Fiorida Department of State	
10.	•	9. Election Campa Trust Fund Cont	ign Financing	\$5.00 May Be Added to Fees	Make check payable to	
10.	Due by May 1, 2008	9. Election Campa Trust Fund Cont	aign Financing tribution.	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State OFFICERS AND DIRECTORS IN 10	ddition
	Due by May 1, 2008 OFFICERS AND DIR	9. Election Campa Trust Fund Cont	ign Financing tribution.	\$5.00 May Be Added to Fees ADDITIONS/CHANGES TO	Make check payable to Florida Department of State OFFICERS AND DIRECTORS IN 10 .	ddition
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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.

161.416.9613