

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006177

FILED
Apr 24, 2007
Secretary of State

Entity Name: COUNTRY CLUB VILLAS OF BOCA RATON CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

835 N.W. 5TH AVE
BOCA RATON, FL 33432

New Principal Place of Business:

835 N.W. 5TH AVE
BOCA RATON, FL 33432

Current Mailing Address:

835 N.W. 5TH AVE
BOCA RATON, FL 33432

New Mailing Address:

835 N.W. 5TH AVE
BOCA RATON, FL 33432

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CROYLE, PHILIP J
370 W CAMINO GARDENS BLVD STE 300
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: FRIEDMAN, EDWARD
Address: 835 N.W. 5TH AVE
City-St-Zip: BOCA RATON, FL 33432

Title: DVS () Delete
Name: LOMBARDI, RONALD
Address: 768 W. CAMINO REAL
City-St-Zip: BOCA RATON, FL 33486

Title: D () Delete
Name: DURAN, PEDRO
Address: 1311 N.W. 17TH AVE
City-St-Zip: BOCA RATON, FL 33486

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EDWARD FRIEDMAN

DPT

04/24/2007

Electronic Signature of Signing Officer or Director

Date