

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2007 8:00 am
Secretary of State

03-19-2007 90088 028 ****61.25

DOCUMENT # N06141 1. Entity Name PROMENADE AT BOCA POINTE CONDOMINIUM ASSOCIATION NO. 3, INC.					
Principal Place of Business 7137 A PROMENADE DR BOCA RATON, FL 33433-6903			Mailing Address 7169 PROMENADE DR BOCA RATON, FL 33433-6903		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
COMMUNITY ASSOC. SERVICES 7137 PROMENADE DR BOCA RATON, FL 33433				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
Filing Fee Is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	TD ☒ Delete		TITLE	☐ Change ☐ Addition	
NAME	SANDLER, LOUIS		NAME		
STREET ADDRESS	7233 PROMENADE DR		STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON, FL 33433		CITY-ST-ZIP		
TITLE	VP ☐ Delete		TITLE	☐ Change ☐ Addition	
NAME	NIERENBERG, NORMAN		NAME		
STREET ADDRESS	7217 PROMENADA DR		STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON, FL 33433		CITY-ST-ZIP		
TITLE	SD ☐ Delete		TITLE	☐ Change ☐ Addition	
NAME	NOLAND, BERNICE		NAME		
STREET ADDRESS	7217 PROMENADE DRIVE		STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON, FL		CITY-ST-ZIP		
TITLE	D ☐ Delete		TITLE	☐ Change ☐ Addition	
NAME	BRUCKNER, MARTIN		NAME		
STREET ADDRESS	7209 PROMONADE DR		STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON, FL 33433		CITY-ST-ZIP		
TITLE	P ☐ Delete		TITLE	☐ Change ☐ Addition	
NAME	KRONHAUS, LARRY		NAME		
STREET ADDRESS	7217 PROMENADE DRIVE		STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON, FL		CITY-ST-ZIP		
TITLE	☐ Delete		TITLE	☐ Change ☒ Addition	
NAME			NAME	Marty Mayblum	
STREET ADDRESS			STREET ADDRESS	7201 Promenade Dr	
CITY-ST-ZIP			CITY-ST-ZIP	Boca Raton, FL 33433	
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.					
SIGNATURE: _____ Date _____ Daytime Phone # _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					