

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06141

FILED
Mar 05, 2009
Secretary of State

Entity Name: PROMENADE AT BOCA POINTE CONDOMINIUM ASSOCIATION NO. 3, INC.

Current Principal Place of Business:

7137 A PROMENADE DR
BOCA RATON, FL 334336903

New Principal Place of Business:

7169 PROMENADE DR
BOCA RATON, FL 334336903

Current Mailing Address:

7169 PROMENADE DR
BOCA RATON, FL 334336903

New Mailing Address:

FEI Number: 59-2643019

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CMC MANAGEMENT
7169 PROMOMADE DR
BOCA RATON, FL 33433 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: D () Delete
Name: MAYBLUM, MARTY
Address: 7201 PROMONADE DR.
City-St-Zip: BOCA RATON, FL 33433

Title: DP () Delete
Name: NIERENBERG, NORMAN
Address: 7217 PROMENADA DR
City-St-Zip: BOCA RATON, FL 33433

Title: D () Delete
Name: BRUCKNER, MARTIN
Address: 7209 PROMONADE DR
City-St-Zip: BOCA RATON, FL 33433

Title: DT () Delete
Name: LEVINE, MARVIN
Address: 7217 PROMANADY DR
City-St-Zip: BOCA RATON, FL 33433

Title: () Delete
Name:
Address:
City-St-Zip:

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:

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

Title: D () Change (X) Addition
Name: SCHAPIRO, FAYE
Address: 7233 PROMENADE DR
City-St-Zip: BOCA RATON, FL 33433

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: NORMAN NIERENBERG

P

03/05/2009

Electronic Signature of Signing Officer or Director

Date