## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # N07223**

1. Entity Name
STONE PRINCE COLLEAND COLINTRY CLUB OF BOCA



**FILED** Feb 23, 2004 8:00 am Secretary of State 02-23-2004 90027 013 \*\*\*\*61.25

Daytime Phone #

RATON,IN	NC.	KT CLUB	OF BOCA							
	e of Business EBRIDGE BLVD , FL 33498-6443	Mailing Address / 10343 STONEBRIDGE BLVD BOCA RATON, FL 33498-6443								*** v.pp
. 194 194										3 11 111 -
2. Principal Pi	ace of Business	3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.				02122004 Chg-NP CR2E037 (10/03)				
City & State	City & State		City & State			4. FEI Number         Applied For           59-2539217         Not Applicable				
Zip	Country	Zip !		Country		5. Certificate of Status Desired  \$8.75 Additional Fee Required				
	6. Name and Address of Current	Registered A	gent -			7. Name and Add	ress of New F	Registered A	gent	w :===
BIVELACQUE, CATHY				Name						
10343 STONEBRIDGE BLVD BOCA RATON, FL 33498				Street Address (P.O. Box Number is Not Acceptable)						
			•	City				FL	Zip Code	
the obligation	named entity submits this statement for ions of registered agent.	in San	or the second of				the State of Flo	in the second second	ımiliar with, a	ind accept
	Signature, typed or printed name of registered agent	and title if applicabl	le. (NOTÉ: Re	egistered Agent signa	ture required	when reinstating)		DATE		
CST-SI-30	Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campa Trust Fund Con	aign Financing tribution:		\$5.00 May Be Added to Fees		lake check rida Departi		
10. OFFICERS AND DIRECTORS			11.		ADDITIONS/CHANG	ES TO OFFICE	RS AND DIR	ECTORS IN	10	
TITLE	PD MESHEL, LEON		☐ Delete	TITLE	SD	e Golden-	Winter	~ <b>&lt;</b>	☐ Change	X Addition
NAME STREET ADDRESS	10343 STONEBRIDGE BLVD.			NAME Street address	1034	0343 Stonebridge Blud				
CITY-ST-ZIP	BOCA RATON, FL 33498			CITY-\$T-2 P		- Raton Fi				
TITLE	VD		☐ Delete	TITLE		ŕ			☐ Change	☐ Addition
NAME STREET ADDRESS	WEINSTEIN, MARVIN 10343 STONEBRIDGE BLVD.			NAME STREET ADDRESS				·		
CITY-ST-ZIP	BOCA RATON, FL 33498			CITY-ST-ZIP						
TITLE	SD		Delete	TITLE		(C)		<del>=</del>	Change	☐ Addition
NAME STREET ADDRESS	FLEISIG, ARNOLD 10343 STONEBRIDGE BLVD			NAME Street address		***		_		
CITY-ST-ZIP	BOCA RATON, FL 33498			CITY-ST-ZIP						
TITLE	TD		☐ Delete	TITLE					☐ Change	Addition
NAME	DASH, MARTIN 1034 STONEBRIDGE BLVD			NAME STREET ADDRESS						
STREET ADDRESS CITY-ST-ZIP	BOCA RATON, FL 33498			CITY-ST-ZIP						
TITLE	,,		☐ Delete	TITLE					☐ Change	☐ Addition
NAME	ay yang sama da			NAME					12 12 1	4
STREET ADDRESS CITY-ST-ZIP				STREET ADDRESS CITY-ST-ZIP		1 <u>3 </u>			- N. 7.75.77	<u></u>
TITLE	STATE OF THE STATE	· · ·	C□ Delete + 1,750 f.	(TITLE) (* 1951 25)		SSUMMENT OF		gerie kritisty	☐ Change ···	Addition
STREET ADDRESS	to the processing of the control of			- NAME STREET ADDRESS		in automorphism	£	5,7E		<u></u> ,
CITY-ST-ZIP	en general en		The Notice of Section 1	CITY-ST-ZIP		i grand margarit atq. 18 Anna mandandi ini dana misimi ni 1904 di				
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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 by 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: