

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07516

FILED
Apr 22, 2009
Secretary of State

Entity Name: BOCA PALM PROFESSIONAL PLAZA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

6971 NO. FEDERAL HIGHWAY
402
BOCA RATON, FL 33487 US

New Principal Place of Business:

Current Mailing Address:

6971 NO., FEDERAL HWY
402
BOCA RATON, FL 33487 US

New Mailing Address:

FEI Number: 59-2820273

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREENWALD, STEVEN I
6971 N. FEDERAL HIGHWAY
SUITE 105
BOCA RATON, FL 33487 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: HIRONITIS, EFI
Address: 6971 NO. FEDERAL HIGHWAY #204
City-St-Zip: BOCA RATON, FL 33487

Title: VP () Delete
Name: WEINRICH, KARL
Address: 6971 NO., FEDERAL HIGHWAY # 100
City-St-Zip: BOCA RATON, FL 33487

Title: P () Delete
Name: GABRIEL, LAWRENCE J
Address: 6971 NO FEDERAL HIGHWAY #206
City-St-Zip: BOCA RATON, FL 33487

Title: ST () Delete
Name: DAVIS, NANCY
Address: 6971 NO FEDERAL HIGHWAY # 402
City-St-Zip: BOCA RATON, FL 33487

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HIRONITIS, EFI
Address: 6971 NO. FEDERAL HIGHWAY #102
City-St-Zip: BOCA RATON, FL 33487

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: LAWRENCE GABRIEL

P

04/22/2009

Electronic Signature of Signing Officer or Director

Date