2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N08397

1. Entity Name

WIND KEY AT BOCA WEST PROPERTY OWNERS' ASSOCIATION, INC.



FILED
Mar 24, 2003 8:00 am
Secretary of State

03-24-2003 90176 045 ****70.00

						7	منت						
Principal Place of Business				Mailing Address									
21045 COMMERCIAL TR BOCA RATON FL 33486				2104S COMMERCIAL TR BOCA RATON FL 33486									
	•												
2. Principal Place of Business 3. N				. Mailing Address								 	
Suite, Apt. #, etc.				Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES					
City & State				City & State				4. FEI Number 5)- 2716248		-	Applied For Not Applicable	
Zip Country			Zi	q	Coun	ntry 5. Certificate of S			tatus Desired			Additional uired	
	6. Name	and Address of Current	t Register	ed Agent				7. Name and Add	ress of New Regist	ered Age	nt =		
						Name							
WILLIAM K. ISAACSON , 21045 COMMERCIAL TR						Street Address (P.O. Box Number is Not Acceptable)							
BOCA RATON FL 33486													
					f	City				FL	Zip Code	9	
		submits this statement f	or the purp	oose of changing its	registered	office o	r registere	ed agent, or both, in	the State of Florida.	I am fami	lliar with,	and accept	
the obligat	tions of registe	ered agent.											
SIGNATURE		or printed name of registered agen	t and title if ap	plicable. (NOTE	: Registered	Agent signat	ure required	when reinstating)	<u></u>	DATE			
		•		•			· · · · · · · · · · · · · · · · · · ·						
FILE NOW: FEE IS \$61.25 9. Election Campa Trust Fund Con						-		\$5.00 May Be Added to Fees	Make C Florida D				
10.		OFFICERS AND DI	RECTORS	<u> </u>	11.		Α	DDITIONS/CHANG	ES TO OFFICERS AN	ND DIREC	TORS IN	10	
TITLE	VPD			☐ Delete	TITLE						Change	Addition	
NAME	BINDER, P	HYLLIS			NAME						-		
STREET ADDRESS	7771 WINI) key dr			STREET	ADDRESS							
CITY=ST-ZIP	BOCA RAT	ron fl			CITY-5	IT-ZIP							
TITLE	P			☐ Delete	TITLE						Change	Addition	
NÁME	GOLDSTE				NAME								
STREET ADDRESS	7791 WINI		_			ADDRESS				-			
CITY-ST-ZIP	BOCA RAT	ON FL	-		CITY-S	T-ZIP"	~~~						
TITLE	D	***		Delete Delete	TITLE	-	4	4 Clash	2.0		Change	Addition	
NAME STREET ADDRESS	KATZ, JUL			•	NAME	ADDDCCC	Y IOLI	T STEPH	- TV				
CITY-ST-ZIP	7775 WINE				CITY-S	ADDRESS	בקר	t Stephi og Wind Ke oca Radon	4 Kr .				
	BOCA RAT	UN FL					BC	oca kulun	<u> </u>		Change	☐ Addition	
TITLE NAME	MISHKIN, I	HOWARD		☐ Delete	TITLE NAME						Change	☐ Addition	
STREET ADDRESS	7760 WINE					ADDRESS							
CITY-ST-ZIP	BOCA RAT				CITY-S								
TITLE	Ť			. Delete	TITLE			 	· · · · · · · · · · · · · · · · · · ·		Change	Addition	
NAME	STEINBER	G, CHARLES			NAME						•	-	
STREET ADDRESS	7838 WIND				STREET	ADDRESS							
CITY-ST-ZIP	BOCA RAT			·	_CITY-S	T-ZIP							
TITLE				☐ Delete	TITLE	٠-,					Change	☐ Addition	
NAME					NAME								
STREET ADDRESS	1					ADDRESS							
CITY-ST-ZIP					CITY-S	T-ZIP							

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 or trustee impowered 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:

Samuel Statelles

3/3/03 56/4882066