

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N08791 (8)**

1. Corporation Name

LA JOYA OF BOCA HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business

Mailing Address

% QUALITY MGT.
1761 W. HILLSBORO BLVD. SUITE 326
DEERFIELD BEACH FL 33442

% QUALITY MGT.
1761 W. HILLSBORO BLVD. SUITE 326
DEERFIELD BEACH FL 33442

3. Date Incorporated or Qualified
04/18/1985

3a. Date of Last Report
04/11/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country
24 25

28 Zip Country
29 30

4. FEI Number

59-2838218

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

QUALITY MGT.
1761 W. HILLSBORO BLVD
STE. 326
DEERFIELD BEACH FL 33442

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP
**PD
HAUBRICH, GUNTER
23059 L'ERMITAGE CIRCLE
BOCA RATON FL**

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-STATE-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP
**D
BOONYK, RUSSE;
23114 L'ERMITAGE CIRCLE
BOCA RATON FL**

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-STATE-ZIP

TITLE ☒ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP
**VD
COCOLA, LINDA
23186 L'ERMITAGE CIRCLE
BOCA RATON FL**

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-STATE-ZIP

TITLE ☒ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP
**DT
CURCIO, PEGGY
23179 L'ERMITAGE CIRCLE
BOCA RATON FL**

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-STATE-ZIP

TITLE ☒ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP
**SD
ANDERSON, DANA
23065 L'ERMITAGE CIRCLE
BOCA RATON FL**

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-STATE-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-STATE-ZIP

**TREASURER
COLLEEN COLEMAN
83221 L'ERMITAGE CIRCLE
BOCA RATON FLA 33433**

**SECRETARY
JULES KRASNER
23012 L'ERMITAGE CIRCLE
BOCA RATON FLA 33433**

**DIRECTOR
JAMES FRANSKOVSKY
23029 L'ERMITAGE CIRCLE
BOCA RATON FLA 33433**

**DIRECTOR
GENE MIKEL
23018 L'ERMITAGE CIRCLE
BOCA RATON FLA 33433**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and is true and correct to the best of my knowledge and belief, and 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 12 or Block 13, and is not changed, or of an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GUNTER HAUBRICH 1/26/96 954-4270707

CR2E037 (12/95)