

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 14, 2008 8:00 am**  
**Secretary of State**

04-14-2008 90064 039 \*\*\*\*61.25

<b>DOCUMENT # N11032</b> 1. Entity Name <b>BOCA GLADES "D" CONDOMINIUM ASSOCIATION, INC.</b>					
Principal Place of Business <b>BENCHMARK PROPERTY MANAGEMENT</b> <b>7932 WILES ROAD</b> <b>CORAL SPRINGS, FL 33065</b>			Mailing Address <b>BENCHMARK PROPERTY MANAGEMENT</b> <b>7932 WILES ROAD</b> <b>CORAL SPRINGS, FL 33065</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number <b>59-2535836</b>	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
<b>ROBERT KAYE &amp; ASSOCIATES, P.A.</b> <b>6261 NW 6TH WAY STE. 103</b> <b>FORT LAUDERDALE, FL 33309</b>				Name  Street Address (P.O. Box Number is Not Acceptable)  City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	P <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	SCHARAK, LISA	NAME			
STREET ADDRESS	8625 BOCA GLADES BLVD. W. APT. H	STREET ADDRESS			
CITY-ST-ZIP	BOCA RATON, FL 33434	CITY-ST-ZIP			
TITLE	T <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	LEHNER, ROBERT	NAME			
STREET ADDRESS	8705D BOCA GLADES BLVD W	STREET ADDRESS			
CITY-ST-ZIP	BOCA RATON, FL 33434	CITY-ST-ZIP			
TITLE	S <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	KAINER, NATALIE	NAME			
STREET ADDRESS	8601 E BOCA GLADES BLVD. W.	STREET ADDRESS			
CITY-ST-ZIP	BOCA RATON, FL 33434	CITY-ST-ZIP			
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	LEBOVITZ, ALAN	NAME			
STREET ADDRESS	8649G BOCA GLADES BLVD W	STREET ADDRESS			
CITY-ST-ZIP	BOCA RATON, FL 33434	CITY-ST-ZIP			
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	CANTOR, JEROME	NAME			
STREET ADDRESS	8649F BOCA GLADES BLVD W	STREET ADDRESS			
CITY-ST-ZIP	BOCA RATON, FL 33434	CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
<b>SIGNATURE: <i>Lisa K. Scharak</i> / <i>LISA K. SCHARAK</i> President 4/14/08</b>					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					