## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N11032

FILED Mar 25, 2009 Secretary of State

Entity Name: BOCA GLADES "D" CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** BENCHMARK PROPERTY MANAGEMENT 7932 WILES ROAD CORAL SPRINGS, FL 33065 **New Mailing Address: Current Mailing Address:** BENCHMARK PROPERTY MANAGEMENT 7932 WILES ROAD CORAL SPRINGS, FL 33065 FEI Number: 59-2535836 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ROBERT KAYE & ASSOCIATES, P.A. 6261 NW 6TH WAY STE. 103 FORT LAUDERDALE, FL 33309 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete SCHARAK, LISA SNEAD, JUDITH, K. Name: Name: 8625 BOCA GLADES BLVD. W. APT. H Address: 8657 BOCA GLADES BLVD. W. APT. H Address: City-St-Zip: BOCA RATON, FL 33434 City-St-Zip: BOCA RATON, FL 33434 Title: () Delete Title: (X) Change ( ) Addition Name: LEHNER, ROBERT Name: CUTLER, ADRIENNE Address: 8705D BOCA GLADES BLVD W Address: 8657 BOCA GLADES BLVD W APT. D City-St-Zip: BOCA RATON, FL 33434 City-St-Zip: BOCA RATON, FL 33434 Title: () Delete Title: () Change () Addition KAINER, NATALIE Name: Name: 8601 E BOCA GLADES BLVD. W. Address: Address: City-St-Zip: BOCA RATON, FL 33434 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition LEBOVITZ, ALAN Name: Name: LEBOVITZ, ALAN 8649G BOCA GLADES BLVD W Address: Address: 8649G BOCA GLADES BLVD W City-St-Zip: BOCA RATON, FL 33434 City-St-Zip: BOCA RATON, FL 33434 Title: () Delete Title: () Change () Addition CANTOR, JEROME Name: Name: 8649F BOCA GLADES BLVD W Address: Address: City-St-Zip: BOCA RATON, FL 33434 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: JUDITH K. SNEAD Ρ 03/25/2009