## FILE NOW: FILING FEE IS \$61.25

**NONPROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(2)

ii corporatio	11 HOUNG	• •		- 1			
BOCA OFFICE AND WAREHOUSE PARK CORPORATION							
Principal Plac	Mailing Address	· · · · · · · · · · · · · · · · · · ·		d ubblitter abt itell block blief stibet tilbt blett a			
8401 E ROGERS CIRCLE BOCA RATON FL 33487		LAW OFFICES OF EISEN & WILLITS 299 CAMINO GARDENS BLVD SUITE 204 BOCA RATON FL 33432			3. Date Incorporated or Qualified  04/22/1986  4. FEI Number		plied For
2. Principal P	lace of Business	2a. Mailing Address			59-2724142		
21		28 6401 East Rogers Circle		10	5. Certificate of Status Desired	\$8.75 A	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		~	6. Election Campaign Financing	\$5,00 N	
22		27 Sutc # 17			Trust Fund Contribution	Added to	
City & State		City & State 28 Boca Rator, Florida		L	7. Is this nonprofit corporation a homeowners association?		
Zip	Country	Zip DUZA CAT	Country	1000	8. This corporation owes or has paid the c		nalbla
24	25 29 33487 30 US			- 1	Personal Property Tax due June 30. Yes No		
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent							
			81 Name	10	my Pine		
WILLITS, RYAN E ESQ.					s (P.O. Box Number Is Not Acceptable)		
LAW OFICES OF EISEN & WILLITS			[_[		101 E Rogers Circle	Suite	# 17
299 CAMINO GARDENS BLVD SUITE 204			63				
BOCA RATON FL 33432			84 City	<u></u>		85 Zip (	ode
				<u>B00</u>	ca Raton F	L 3	ode 487
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.							
agent. I a	im familiar with, and accept the obliga	tions of, Section 617.0503, Flori	da Statutes.		(	)	
SIGNATURE Signature of printed name of registered agont and tele if applicable (NOTE: Registered Agent algoriture required					5/1	3/98	
12.	OFFICERS AND		legislered Agent signature i	required	ADDITIONS/CHANGES TO OFFICERS AN		S IN 12
TITLE	PD	DELETE	1.1 TITLE	PO		Change	X Addition
NAME	SPENGEMAN, EDWIN W.		1.2 NAME	Je	erry fine 101 E Royers Cir # 17		`
STREET ADDRESS	4411 WOODFIELD BLVD.		1.3 STREET ADDRESS	6	101'E Royers Cir # 17		ĺ
CITY-ST-ZIP	BOCA RATON FL 33434		1.4 CITY-ST-ZIP	Be	oca Raton, FL 33487		
TITLE	D	X DELETE	2.1 TITLE		TO	☐ Change	X Addition
NAME	MENZEL, PAUL		22 NAME	J	OAMA Dorey		1
STREET ADDRESS	THE FORUM PLAZA		2.3 STREET ADDRESS	53	350 10th Ave North #6		,
CITY - ST - ZIP	SCRANTON PA		2.4 CITY-ST-ZIP		ake Worth Florida 3	3463	
TITLE	D	DELETE	3.1 TITLE		A.	Change	<b>△</b> Addition
NAME	j Lewis, Jerry		3.2 NAME		nia Schwartz		
STREET ADDRESS	550 CLAY AVENUE, APT. 4		3.3 STREET ADDRESS	11	75 5th Ave		
CITY-ST-ZIP	SCRANTON PA		3.4. CITY-ST-ZIP		NY, NY 10010		152 1 1 100
TITLE		☐ DELETE	4.1 TITLE	Į.	ن د ا	Change	Addition
NAME			4. 2 NAME	Ò	and Hill		]
STREET ADDRESS			4.3 STREET ADDRESS	4	401 E Roser Cir #1 Boca Ruton FL 33487		Ì
CITY-ST-ZIP		DELETE	4.4 CITY-ST-ZIP		THE PLATES PL 33781	Change	Addition
TITLE	j	₩ DETEIL	5.1 TITLE			CIT CHAINNG	
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP	<del></del>	DELETE	5.4 CITY-ST-ZIP			Change	Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

Jerrold Pine Jewill Pine President 2/13/44

**FILED** 

Mar 02 1998 8:00am

Secretary of State