2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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DOCUMENT # N18604

1. Entity Name

ISLAND COURT AT BOCA WEST PROPERTY OWNERS' ASSOCIATION, INC.



Principal Place of Business Mailing Address 21 SE 5TH STREET 21 SE 5TH STREET SUITE 100 SUITE 100 BOCA RATON, FL 33432 BOCA RATON, FL 33432 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03052008 Chg-NP CR2E037 (12/06) City & State City & State 4. FEI Numbe Applied For 65-0019044 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HOWARD, ELIAS MAGOGANY SERVICES INC. Street Address (P.O. Box Number is Not Acceptable) 6700 N.W. BROKEN SOUND PARKWAY, STE. 203 BOCA RATON, FL 33487 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signeture required when reinstating) DATE 9. Election Campaign Financing Filing Fee Is \$61.25 \$5.00 May Be Make check payable to Trust Fund Contribution Due by May 1, 2008 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE □ Delete TITLE ☐ Change ☐ Addition KRAUSER, HARVEY NAME NAME STREET ADORESS 19496 ISLAND CT. DRIVE STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33434 CITY-ST-ZIP TITLE TD Oeteta mı ■ Addition SIEGEL, ALVIN NAME NAME STREET ADDRESS 19575 ISLAND CT. DRIVE STREET ADDRESS CITY-ST-71P BOCA RATON, FL 33434 CITY-ST-ZIP VP TITLE ☐ Defete TITLE Channe ☐ Addition GREENBURG, HUGH NAME STREET ADDRESS 19460 ISLAND COURT DR STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33434 CITY-ST-71P TITLE ☐ Delete IIILE ☐ Change ■ Addition NAME LAUPHEIMER, MICHAEL NAME STREET ADDRESS 19442 ISLAND COURT DRIVE STREET ADDRESS CITY-ST-7IP BOCA RATON, FL 33434 CITY-ST-ZIP RECEIVED TITLE ☐ Delete TITLE Channe ☐ Addition FIRTEL, NORMA NAME NAME MAR 2 1 2008 19533 ISLAND CT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BOCA RATON, F 33434 CITY-ST-ZIP CIU REV/ADM TILLE ☐ Deteta IIILE Change ■ Addition ROSEN, MARVIN NAME NAME

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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

19569 ISLAND CT DRIVE

BOCA RATON, FL 33434

STREET ADDRESS

CITY-ST-ZIP

TURE AND TYPED OF PRINTES NAME OF SIGNING OFFICER OR DIRECTOR

3/13/08

Daytime Phone #