

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90441 011 ****61.25

DOCUMENT # N19390

1. Entity Name
LA MIRADA AT BOCA POINTE CONDOMINIUM
ASSOCIATION NUMBER EIGHT, INC.



Principal Place of Business
C/O PRIME MANAGEMENT GROUP, INC
6300 PARK OF COMMERCE BLVD
BOCA RATON, FL 33487-8290 US

Mailing Address
C/O PRIME MANAGEMENT GROUP, INC
6300 PARK OF COMMERCE BLVD
BOCA RATON, FL 33487-8290 US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04232004 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
65-0103460

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SWATT, MYRON
6300 PARK OF COMMERCE BLVD
BOCA RATON, FL 33487

Name

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

City

FL

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 signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME D
STREET ADDRESS CARUSO, WALTER
CITY-ST-ZIP 7786 LAMIRADA DRIVE
BOCA RATON, FL 33133 ☒ Delete

TITLE
NAME D
STREET ADDRESS DONNER, STEPHANIE
CITY-ST-ZIP 7790 LA MIRADA DR
BOCA RATON FL 33433 ☐ Change ☒ Addition

TITLE
NAME D
STREET ADDRESS DANDRELLIS, JAMES
CITY-ST-ZIP 7806 LA MIRADA DRIVE
BOCA RATON, FL ☒ Delete

TITLE
NAME D
STREET ADDRESS LEDON, MARK
CITY-ST-ZIP 7800 LA MIRADA DR
BOCA RATON FL 33433 ☐ Change ☒ Addition

TITLE
NAME PD
STREET ADDRESS TERKEL, MARSHALL
CITY-ST-ZIP 7824 LA MIRADA DRIVE
BOCA RATON, FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 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.

SIGNATURE:

John R. Lee
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-27-04 361-0536