FILE NOW: FILING FEE IS $61.25

FILED
Apr 15 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT **1997**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N25605 (9)

1. Corporation Name

BLUE CORAL COVE HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
23123 STATE ROAD 7 SUITE 350-A BOCA RATON FL 33428	P.O. BOX 97-0069 BOCA RATON FL 33497-0069

3. Date Incorporated or Qualified: 03/25/1988
3a. Date of Last Report: 04/30/1996

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22
Suite, Apt. #, etc. — 27
City & State — 23
City & State — 28
Zip — 24
Country — 25
Zip — 29
Country — 30

4. FEI Number: 65-0117358 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

PALOMBI, GARY
23123 STATE ROAD 7
SUITE 350-A
BOCA RATON FL 33428

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	GUSHNER, HARVEY		1.2 NAME		
STREET ADDRESS	17281 CORAL COVE WAY		1.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY-ST-ZIP		
TITLE	P/D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	MACDONALD, WILLIAM		2.2 NAME		
STREET ADDRESS	17210 CORAL COVE WAY		2.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL		2.4 CITY-ST-ZIP		
TITLE	ST/D	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	NEWMAN, GERALD		3.2 NAME		
STREET ADDRESS	17161 CORAL COVE WAY		3.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL		3.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	SEREKSY, CLIFFORD		4.2 NAME		
STREET ADDRESS	17261 CORAL COVE WAY		4.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL		4.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	5.1 TITLE	Ed Gorenstein (D)	☐ Change ☒ Addition
NAME	RUBIN, ALAN		5.2 NAME		
STREET ADDRESS	17231 CORAL COVE WAY		5.3 STREET ADDRESS	17251 Coral Cove Way	
CITY-ST-ZIP	BOCA RATON FL 33496		5.4 CITY-ST-ZIP	Boca Raton, FL 33496	
TITLE	V	☒ DELETE	6.1 TITLE	George Bell (D)	☐ Change ☒ Addition
NAME	YUDELL, MARTIN		6.2 NAME		
STREET ADDRESS	17290 CORAL COVE WAY		6.3 STREET ADDRESS	17136 Coral Cove Way	
CITY-ST-ZIP	BOCA RATON FL 33496		6.4 CITY-ST-ZIP	Boca Raton, FL 33496	

CR2E037 (9/96)

14. I do 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.

SIGNATURE: William P MacDonald Jr 27 1997 $651-477-9907