FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT #

N27726

(1)

ISLES OF BOCA CONDOMINIUM, SECTION II ASSOCIATIO N, INC.

Principal Place of Business Mailing Address							
		-					
2801 N. MILIT		2801 N. MILITARY TRA 80	IIL				
BOCA RATON FL 33431 US		BOCA RATON FL 33431 US		3. Date Incorporated or Qualified 08/03/1988	3a. Date of Last 03/28/1		
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number 59-2395327	├ ──	Applied For Not Applicable
21		26			39 2030021		Additional
Suite, Apt. #, etc.		Suite, Apt. #, etc.	 		5. Certificate of Status Desired	Fee Required	
Orty & State	3	City & State			6. Election Campaign Financing	\$5.0	May Be
23		28			Trust Fund Contribution		ed to Fees
Zip	Country	Zip	Cour	ntry	8. This corporation has liability for in		. 199.032,
24	25	29	30		Florida Statutes L 10. Name and Address of New Re	Yes No	
	9. Name and Address of Curre	nt Registered Agent		81 Name	10. Name and Address of New Re	Aleteran Whent	
			Į				
HAAG, DAVID 2801 N. MILITARY TRAIL			82 Street A		ess (P.O. Box Number is Not Acceptable	9)	
			}	83			
BOCA F	RATON FL 33431						
			Ţ	84 City		FL 85 Z	ip Code
		2 and C17 1500 Florido Ptotul	tor the above	n named corror	ration submits this statement for the purp	ose of changing its	registered office
or coninto	red agent, or both, in the State of Flor ith, and accept the obligations of, Sec	uda. Such change was authoru	zeci ov ine c	orporation's boar	rd of directors. I hereby accept the appo	intment as registere	d agent. I am
SIGNATURE	Signature, typed or printed name of registered age	t and title it and cable (N	OTF: Registered	Agent signature require	d when reinstaling)	DATE	
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI		
TITLE	D	DELETE	1.1 703	'L E		Change	Addition
NAME	LATHAM, E.H.		12 NA	AME			
STREET ADDRESS	23085-4 AQUA VIEW		1.3 \$1	REET ADDRESS			
CHY-ST-ZIP	BOCA RATON FL		1.4 CI	TY-ST-ZIP		——————————————————————————————————————	
TITLE	PD	DELETE	2 1 TI	TLE		Change	Addition
NAME	COHEN, MARC		2.2 N/	AME			
STREET ADDRESS	23140-4 ISLAND VIEW		2.3 \$1	REET ADDRESS			
CITY-S1-ZIP	BOCA RATON FL		2 4 0	ITY-ST-ZIP			- Addition
TITLE	TD	DELETE	3 1 TI	TLE		☐ Change	Addition
NAME	PIKE, ROBERT		3.2 N				
STREET ADDRESS	23085-2 AQUA VIEW			TREET ADDRESS			
C1TY - ST - ZIP	BOCA RATON FL	Floreste		ITY-ST-ZIP		☐ Change	Addition
TITLE	VD	DEFELE	4.1 Ti			Change	
NAME	NORTON, BARBARA		4 2 N				
STREET ADDRESS	23109-2 AQUAVIEW			TREET ADDRESS			
CITY-ST-ZIF	BOCA RATON FL	Floritre		ITY-ST-ZIP		☐ Change	Addition
TITLE	SD CARDO	DELETE	5179			டில்கரி	
NAME	CANTOR, CAROL		5.2 N				
STREET ADDRESS				TREET ADDRESS			
CITY-ST-ZIP	BOCA RATON FL	□ DC: CYC		ITY-ST-ZIP		Change	e Addition
TOTLE		DELETE	617	1			
NAME				AME TREET ADODESS			
STREET ADDRESS				TREET ADDRESS			
DITY-ST-7IP			640	ITY-ST-ZIP			

14. I do hereby certify that the information supplie3 with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this arrival report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cetti; 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: X

Autoria Tuttor
Turk and typed on printed name of signing officer or director

/30/96 Date

Daytime Phone #

1 1881) DE 112 1131 1884 INDER 1188 DE 11 BERLE 1884 DE 1884 D

CR2E037 (12/95)