

# 2002 UNIFORM BUSINESS REPORT (UBR)

4/8/02

**FILED**  
**May 21, 2002 8:00 am**  
**Secretary of State**

04-08-2002 90248 036 \*\*\*\*61.25

**DOCUMENT # N27726**

1. Entity Name

**ISLES OF BOCA CONDOMINIUM, SECTION II ASSOCIATION, INC.**

Principal Place of Business

Mailing Address

2801 N. MILITARY TRAIL  
 BOCA RATON FL 33431  
 US

2801 N. MILITARY TRAIL  
 80  
 BOCA RATON FL 33431  
 US

2. Principal Place of Business

6001 SW 18th St

3. Mailing Address

23130G Island View

Suite, Apt. #, etc.

Club house

Suite, Apt. #, etc.

City & State

Boca Raton FL

City & State

Boca Raton FL

4. FEI Number

59-3097566

Applied For

Not Applicable

Zip

33433

Country

Palm Beach

Zip

33433

Country

Palm Beach

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

SPACE PROPERTY MGMT

C/O VIVIAN DUDA

6001 SW 18TH ST

BOCA RATON FL 33431

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

☐

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 PD  
 PERRY, CLIFFORD  
 23158-3 ISLAND VIEW  
 BOCA RATON FL

☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 VP  
 ALTIERI, MICHAEL  
 23158-5 ISLAND VIEW  
 BOCA RATON FL

☒ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 SD  
 BLOOMSTON, CLAUDIA  
 23158-4 ISLAND VIEW  
 BACO RATON FL

☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 TD  
 DEMIR, SHARON  
 23140-8 ISLAND VIEW  
 BACO RATON FL

☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Change ☒ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 SD  
 CARLA HARROD  
 23122 ISLAND VIEW  
 BOCA RATON, FL 33433

☐ Change ☒ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 D  
 HARRY WARREN  
 23104 ISLAND VIEW  
 BOCA RATON, FL 33433

☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/02

Date

Daytime Phone #

CR2E037 (9/01)