

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30864

FILED  
Jan 23, 2008  
Secretary of State

Entity Name: BOCA MUSEUM FOUNDATION, INC.

**Current Principal Place of Business:**

501 PLAZA REAL  
BOCA RATON, FL 33432

**New Principal Place of Business:**

**Current Mailing Address:**

501 PLAZA REAL  
MIZNER PARK  
BOCA RATON, FL 33432

**New Mailing Address:**

FEI Number: 65-0104704

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BOLGE, GEORGE  
501 PLAZA REAL  
BOCA RATON, FL 33432 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P/D ( ) Delete  
Name: REDGRAVE, ARTHUR MR.  
Address: 5890 WINDSOR TERRACE DRIVE  
City-St-Zip: BOCA RATON, FL 33496

Title: VP/D ( ) Delete  
Name: PERPER, HAROLD E MR.  
Address: 7685 WOOD DUCK DRIVE  
City-St-Zip: BOCA RATON, FL 33434

Title: VP/D ( ) Delete  
Name: ZIEMAN, CATHERINE MS.  
Address: 3100 N. MILITARY TRAIL  
City-St-Zip: BOCA RATON, FL 33431

Title: S/D ( ) Delete  
Name: BUDD, B. MICHAEL MR.  
Address: 600 MAYPOP COURT  
City-St-Zip: BOCA RATON, FL 33483

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GEORGE S. BOLGE

RA

01/23/2008

Electronic Signature of Signing Officer or Director

Date