

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1998



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

FILED Apr 17, 1998 8:00 am Secretary of State

DOCUMENT # N31182 (1)

1. Corporation Name

CORAL BAY AT BOCA CHASE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

PRIME MGMT GROUP INC. 6300 PARK OF COMMERCE BLVD. BOCA RATON FL 33487 US

PRIME MGMT GROUP INC. 6300 PARK OF COMMERCE BLVD. BOCA RATON FL 33487 US

3. Date Incorporated or Qualified

03/14/1989

4. FEI Number

65-0152323

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

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

6. Election Campaign Financing Trust Fund Contribution [] \$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners' association? [] Yes [] No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. [] Yes [] No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KORNSPAN, LILLYN 18304 CLEARBROOK CIRCLE BOCA RATON FL 33498

81 Name MYRON WAT 82 Street Address (P.O. Box Number is Not Acceptable) TRIMEN MANAGEMENT GROUP INC 83 6300 PARK OF COMMERCE BOULEVARD 84 City BOCA RATON FL 85 Zip Code 33487

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 [Signature] (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE TO [X] DELETE NAME DOMATO, CHERYL STREET ADDRESS 1804 CLEARBROOK CIR. BOCA RATON FL

1.1 TITLE VINCENT CANNATELLA [] Change [X] Addition 1.2 NAME 18058 CLEARBROOK CIRCLE 1.3 STREET ADDRESS BOCA RATON FL 33498 1.4 CITY-ST-ZIP

TITLE D [X] DELETE NAME PARFITT, KATHY STREET ADDRESS 18239 FRESH LAKE WAY BOCA RATON FL 33498

2.1 TITLE VD EDWARD MOTTOLO [] Change [X] Addition 2.2 NAME 18281 FRESH LAKEWAY 2.3 STREET ADDRESS BOCA RATON, FL 33498 2.4 CITY-ST-ZIP

TITLE SD [X] DELETE NAME SPERA, ANGELA STREET ADDRESS 18227 FRESH LAKE WAY BOCA RATON FL

3.1 TITLE SD SANDRA ARDEN [] Change [X] Addition 3.2 NAME 18102 CLEAR BROOK CIRCLE 3.3 STREET ADDRESS BOCA RATON, FL 33498 3.4 CITY-ST-ZIP

TITLE VD [X] DELETE NAME SOLETTI, PAT STREET ADDRESS 18164 CLEARBROOK CIRCLE BOCA RATON FL

4.1 TITLE TP ANGELA SPERA [] Change [X] Addition 4.2 NAME 18227 FRESH LAKEWAY 4.3 STREET ADDRESS BOCA RATON, FL 33498 4.4 CITY-ST-ZIP

TITLE PD [X] DELETE NAME KORNSPAN, LILLYN STREET ADDRESS 18304 CLEARBROOK CIRCLE BOCA RATON FL

5.1 TITLE 5.2 NAME CHERYL DOMATO 5.3 STREET ADDRESS 18042 CLEARBROOK CIRCLE 5.4 CITY-ST-ZIP BOCA RATON FL 33498

TITLE [] DELETE NAME STREET ADDRESS CITY-ST-ZIP

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. 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 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: [Signature] SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone # 0045935

CR2E037 (10/97)