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FILED

May 12 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N39347 (2)

1. Corporation Name

BOCA LAGO CABLE FUND, INC.



Principal Place of Business

Mailing Address

9039 VISTA DEL LAGO
BOCA RATON FL 334289039 VISTA DEL LAGO
BOCA RATON FL 33428-31413. Date Incorporated or Qualified
07/30/19903a. Date of Last Report
04/30/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

4. FEI Number
65-0200506Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WALICK DAVID
C/O BOCA LAGO MANAGEMENT
9039 VISTA DEL LAGO
BOCA RATON FL 33428

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE S ☒ DELETE
NAME TANNENBAUM, BARNET
STREET ADDRESS 21964 CYPRESS DR #41B
CITY - ST - ZIP BOCA RATON FL1.1 TITLE S ☐ Change ☒ Addition
1.2 NAME ISRAEL, PHILIP
1.3 STREET ADDRESS 21810 CYPRESS DR #26A
1.4 CITY - ST - ZIP BOCA RATON, FLTITLE P ☐ DELETE
NAME WALICK, DAVID
STREET ADDRESS 21863 ARRIBA REAL
CITY - ST - ZIP BOCA RATON FL2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIPTITLE T ☐ DELETE
NAME LITWIN, ALFRED
STREET ADDRESS 8045 EASTLAKE DR #1C
CITY - ST - ZIP BOCA RATON FL3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIPTITLE V ☐ DELETE
NAME SPITZ, MARVIN
STREET ADDRESS 9270 VISTA DEL LAGO #27G
CITY - ST - ZIP BOCA RATON FL4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIPTITLE D ☐ DELETE
NAME OSIAS, EVELYN
STREET ADDRESS 9283 PECKY CYPRESS LN #15A
CITY - ST - ZIP BOCA RATON FL5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIPTITLE D ☒ DELETE
NAME EPSTEIN, HARRY
STREET ADDRESS 21428 JUEGO CIRCLE #9E
CITY - ST - ZIP BOCA RATON FL6.1 TITLE D ☐ Change ☒ Addition
6.2 NAME HELLMAN, GINETTE
6.3 STREET ADDRESS 21386 JUEGO CIRCLE #10A
6.4 CITY - ST - ZIP BOCA RATON, FL

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DAVID

WALICK

Date

Daytime Phone # 0041827

4/25/97 483-4000 (561)

CR2E037 (9/96)