

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42566

FILED  
Jul 07, 2009  
Secretary of State

Entity Name: BALBOA POINT ASSOCIATION, INC.

**Current Principal Place of Business:**

6300 PARK OF COMMERCE BLVD  
BOCA RATON, FL 33487

**New Principal Place of Business:**

**Current Mailing Address:**

6300 PARK OF COMMERCE BLVD  
BOCA RATON, FL 33487

**New Mailing Address:**

FEI Number: 65-0320980      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

RANDALL ROGER & ASSOCIATES  
621 NW 53RD ST  
BOCA RATON, FL 33487      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: SD      ( ) Delete  
Name: AROUTY, IRVING  
Address: 17317 BALBOA POINT WAY  
City-St-Zip: BOCA RATON, FL 33487

Title: VPD      ( ) Delete  
Name: UNGER, JOSEPH  
Address: 17301 BALBOA POINTE WAY  
City-St-Zip: BOCA RATON, FL 33487

Title: D      ( ) Delete  
Name: LEVY, HERB  
Address: 3744 GORHAM WAY  
City-St-Zip: BOCA RATON, FL 33487

Title: PD      ( ) Delete  
Name: DE VIVO, AL  
Address: 17211 VENTANO DR  
City-St-Zip: BOCA RATON, FL 33487

Title: TD      ( ) Delete  
Name: KAPLAN, ALVIN  
Address: 17293 BALBOA POINT WAY  
City-St-Zip: BOCA RATON, FL 33487

**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:

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: AL DEVIVO

P

07/07/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date