


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2008 8:00 am
Secretary of State

03-28-2008 90037 008 ****61.25

DOCUMENT # N49610					
1. Entity Name ST. TROPEZ AT BOCA GOLF PROPERTY OWNERS ASSOCIATION, INC.					
Principal Place of Business 6300 PARK OF COMMERCE BOCA RATON, FL 33487			Mailing Address 6300 PARK OF COMMERCE BLVD BOCA RATON, FL 33487		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 65-0355953	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
BACKR LAW FIRM, P.A. 400 S DIXIE HWY STE 420 BOCA RATON, FL 33432				Name Street Address (P.O. Box Number is Not Acceptable) City	
				State 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V NELSON LOIS NIESEN 17239-6 BOCA CLUB BLVD BOCA RATON, FL 33487 Vice Pres.		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vogt, Harold, Pres. 17317-6 Boca Club Blvd Boca Raton, FL 33487	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LATCHER, LARRY 17227 BOCA CLUB BLVD BOCA RATON, FL 33487		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Asher, Barbara Treas 17249-3 Boca Club Blvd Boca Raton, FL 33487	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LANDAU, HAROLD 17223-6 BOCA CLUB BLVD BOCA RATON, FL 33487		TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S JOHNSTON, NAN 17323-4 BOCA CLUB BLVD BOCA RATON, FL 33487		TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GLASER, ROBERT 17281-2 BOCA CLUB BLVD BOCA RATON, FL 33487		TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes, and 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 on oath by 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: HAROLDE VOGT <i>Harold E. Vogt, President</i> 3/10/08 561 376 3746					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #					