

FILE NOW: FILING FEE IS \$61.25

FILED

May 11 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # **N50721** (2)
1. Corporation Name
EGRET POINTE ASSOCIATION, INC.



Principal Place of Business 6041 BRIGHTWATER TERRACE BOYNTON BEACH FL 33437 US		Mailing Address 6041 BRIGHTWATER TERRACE BOYNTON BEACH FL 33437 US		3. Date Incorporated or Qualified 09/03/1992	
2. Principal Place of Business 21		2a. Mailing Address 26 6300 PARK OF COMMERCE BL.		4. FEI Number 65-0388360	
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
City & State 23		City & State 28 BOCA RATON, FL 33487		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip 24		Zip 29		7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Country 25		Country 30		8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent BURR, ROBERT 301 YAMATO RD., #4150 BOCA RATON FL 33431		10. Name and Address of New Registered Agent 81 Name MYRON I. SWATT, PRES., PRIME MANAGEMENT GROUP 82 Street Address (P.O. Box Number is Not Acceptable) 6300 PARK OF COMMERCE BOULEVARD 83 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]* DATE **4/23/98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MARGOLIS, JOSEPH	1.2 NAME	MILDRED SCHURMAN
STREET ADDRESS	6065 BRIGHTWATER TERRACE	1.3 STREET ADDRESS	6160 BRIGHTWATER TERRACE
CITY-ST-ZIP	BOYNTON BEACH FL	1.4 CITY-ST-ZIP	BOYNTON BEACH, FL
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DVP	2.2 NAME	JOSEPH WEINBERG
STREET ADDRESS	6149 BRIGHTWATER TERRACE	2.3 STREET ADDRESS	6112 BRIGHTWATER TERRACE
CITY-ST-ZIP	BOYNTON BEACH FL	2.4 CITY-ST-ZIP	BOYNTON BEACH, FL
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DST	3.2 NAME	PAUL FORMAN
STREET ADDRESS	6088 BRIGHTWATER TERRACE	3.3 STREET ADDRESS	6088 BRIGHTWATER TERRACE
CITY-ST-ZIP	BOYNTON BEACH FL	3.4 CITY-ST-ZIP	BOYNTON BEACH, FL
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	EDWARD PINKIERT
STREET ADDRESS		4.3 STREET ADDRESS	6053 BRIGHTWATER TERRACE
CITY-ST-ZIP		4.4 CITY-ST-ZIP	BOYNTON BEACH, FL
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	SIDNEY WAGNER
STREET ADDRESS		5.3 STREET ADDRESS	6100 BRIGHTWATER TERRACE
CITY-ST-ZIP		5.4 CITY-ST-ZIP	BOYNTON BEACH, FL
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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]* **JOSEPH WEINBERG 4/28/98 498-8568**

CR2E037 (10/97)