

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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

03-28-2008 90027 045 \*\*\*\*61.25

**DOCUMENT # N93000000922**

1. Entity Name  
**EXCELLENTE VILLAGE CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business  
2950 JOG RD.  
GREENACRES, FL 33467 US

Mailing Address  
2950 JOG RD.  
GREENACRES, FL 33467 US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03172008 Chg-NP CR2E037 (12/06)

4. FEI Number  
**65-0384326**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**CAPLAN, LOUIS ESQ.  
SACHS, SAX & KLEIN, P.A.  
301 YAMATO RD., STE. 4150  
BOCA RATON, FL 33431**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**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

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

(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. ☐

**\$5.00 May Be  
Added to Fees**

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD ☒ Delete  
NAME BOKISH, GAIL  
STREET ADDRESS 5107 E EUROPA DR  
CITY-ST-ZIP BOYNTON BEACH, FL 33437

TITLE VD ☐ Delete  
NAME BUNSON, JOSEPH  
STREET ADDRESS 5091 SPLENDIDO CT  
CITY-ST-ZIP BOYNTON BEACH, FL 33437

TITLE PD ☐ Delete  
NAME ALLEN, MAL  
STREET ADDRESS 5099 SPLENDIDO CT APT O  
CITY-ST-ZIP BOYNTON BEACH, FL 33437

TITLE SD ☐ Delete  
NAME DONDEY, AL  
STREET ADDRESS 5131-K EUROPA DR  
CITY-ST-ZIP BOYNTON BEACH, FL 33437

TITLE T ☐ Delete  
NAME JACOBSON, JACK  
STREET ADDRESS 5115 EUROPA DR, APT E  
CITY-ST-ZIP BOYNTON BEACH, FL 33437

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE SD ☐ Change ☒ Addition  
NAME Gardner, Rhoda  
STREET ADDRESS 5115 Europa Dr., Apt. C  
CITY-ST-ZIP Boynton Beach, FL 33437

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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. I further certify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Jack Jacobson*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/21/08

(561)

641-1016

Date

Daytime Phone #