NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED

08 JUN -3 AM 8:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N95000001404

1. Entity Name
THE PRESERVE AT BOCA RATON HOA, INC.

Principal Place of Business	Mailing Address
%PRIME MANAGEMENT GROUP 6300 PARK OF COMMERCE BLVD. BOCA RATON, FL 33487	%PRIME MANAGEMENT GROUP 6300 PARK OF COMMERCE BLVD. BOCA RATON, FL 33487

04222008 Chg-NP CR2E037 (12/06)

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

4. FEI Number 23-2842340 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

BACKER LAW FIRM
400 SOUTH DIXIE HIGHWAY
THE ARBOR STE 420
BOCA RATON, FL 33432

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

Amended AR is $61.25

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P OLAH, GARRY 4947 NW 23RD COURT BOCA RATON, FL 33431	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 200131629442 06/24/08--01033--011 **61.25
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP OHULSON, GEORGE 2400 NW 48TH LANE BOCA RATON, FL 33431	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary Bill Coose 5030 NW 24th Circle Boca Raton, FL 33431 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T PELLIGRINO, LISA 5032 NW 24 CIRCLE BOCA RATON, FL 33431	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President Lissa Pellegrino 5032 NW 24th Circle Boca Raton, FL 33431 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S KELMAN, CHAD 5013 NW 24TH CIRCLE BOCA RATON, FL 33431	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GULAFARB, GARY 4945 NW 23RD CT BOCA RATON, FL 33431	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer Gary Gold farb 4945 NW 23rd Ct. Boca Raton, FL 33431 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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: _____ 4/29/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #