FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

POCUMENT # N9700000904 (9)

PARKVIEW ESTATES AT BOCA HOMEOWNERS ASSOCIATION. INC.

Principal Place of Business Mailing Address 12534 WILES ROAD 12534 WILES ROAD 3. Date Incorporated or Qualified CORAL SPRINGS FL 33076 CORAL SPRINGS FL 33076 02/18/1997 4. FEI Number Applied For 65-0711108 Not Applicable 2. Principal Place of Business 2a. Maiting Address \$8.75 Additional 5. Certificate of Status Desired 21 26 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc 6. Election Campaign Financing \$5.00 May Be 22 27 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? Yes 23 28 Zıp Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 29 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name LARRY A. ROTHENBERG, PA 82 Street Address (P.O. Box Number is Not Acceptable) 900 NO FEDERAL HIGHWAY STE 460 83 **BOCA RATON FL 33432** 84 City 85 Zio Code 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, typod or printed name of registered agent and title it applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1.1 TITUE MOSCOVITCH, LEWIS NAME 1.2 NAME 12534 WILES ROAD STREET ADDRESS 1.3 STREET ADDRESS **CORAL SPRINGS FL 33076** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE PERRY, CRAIG NAME 2.2 NAME 12534 WILES ROAD STREET ADDRESS 2.3 STREET ADDRESS **CORAL SPRINGS FL 33076** CITY-SI-ZIP 2. 4 CITY-ST-ZIP DELETE Addition TITLE 3.1 TITLE ALTMAN, OWEN D NAME 3.2 NAME 12534 WILES ROAD STREET ADDRESS 3.3 STREET ADDRESS **CORAL SPRINGS FL 33076** 3.4. CITY - ST - ZIP CITY-ST-ZIP TITLE DELETE 4.1 TITLE ☐ Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 5.1 TITLE Change ☐ Addition TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 City-St-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME

6.3 STREET ADDRESS

14. I hereby certify that the information supplied with this filing does not qualfy for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental angual 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 roceiver of trusted emporator of execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 changed, or on an affact of the roceiver of the control with an address. SIGNATURE:

984-394-8010

FILED

Apr 30 1998 8:00am

Secretary of State