


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2004 8:00 am
Secretary of State

01-28-2004 90010 034 ****61.25

DOCUMENT # N97000001698					
1. Entity Name ADDISON COURT PROPERTY OWNERS' ASSOCIATION, INC.					
Principal Place of Business 1601 FORUM PLACE SUITE 603 WEST PALM BEACH, FL 33401 US			Mailing Address 1601 FORUM PLACE SUITE 603 WEST PALM BEACH, FL 33401 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0852896	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BOOSE, WILLIAM R III 515 N FLAGLER DR 19 FLOOR WEST PALM BEACH, FL 33401			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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE PD	NAME LEVY, ROBERT A		<input type="checkbox"/> Delete		
STREET ADDRESS 1601 FORUM PLACE SUITE 603	CITY-ST-ZIP BOCA RATON, FL 33431				
TITLE VD	NAME GELLER, HARVEY		<input type="checkbox"/> Delete		
STREET ADDRESS 1601 FORUM PLACE SUITE 603	CITY-ST-ZIP BOCA RATON, FL 33431				
TITLE SD	NAME DENBURG, MOSHE		<input type="checkbox"/> Delete		
STREET ADDRESS 5030 CHAMPION BLVD STE D6	CITY-ST-ZIP BOCA RATON, FL 33496				
TITLE D	NAME BUKIET, ZALMAN		<input type="checkbox"/> Delete		
STREET ADDRESS 5030 CHAMPION BLVD STE D6	CITY-ST-ZIP BOCA RATON, FL 33426				
TITLE NAME	STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		
TITLE NAME	STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		
TITLE NAME	STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		
TITLE NAME	STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		
12. 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 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 _____		1/8/04		561-616-3330	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	
HARVEY GELLER, VICE President					