

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 738976

**Entity Name:** THE FAIRWAYS OF BOCA LAGO CONDOMINIUM ASSOCIATION, INC.

**FILED  
Mar 03, 2017  
Secretary of State  
CC8542328265**

**Current Principal Place of Business:**

9039 VISTA DEL LAGO  
BOCA RATON, FL 33428

**Current Mailing Address:**

9039 VISTA DEL LAGO  
BOCA RATON, FL 33428 US

**FEI Number: 59-1849337**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

SHARF, ARTHUR  
C/O BOCA LAGO MANAGEMENT  
9039 VISTA DEL LAGO  
BOCA RATON, FL 33428 US

*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.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            SHARF, ARTHUR  
Address        8411 CASA DEL LAGO #17A  
City-State-Zip: BOCA RATON FL 33433

Title            VICE PRES. / SECRETARY  
Name            WINER, SUELLEN  
Address        8413 CASCA DEL LAGO #18B  
City-State-Zip: BOCA RATON FL 33433

Title            TREASURER  
Name            ZELEN, HERBERT  
Address        8305 CASA DEL LAGO #3H  
City-State-Zip: BOCA RATON FL 33433

Title            DIRECTOR  
Name            ALTMAN , MANNY  
Address        8425 CASA DEL LAGO #21E  
City-State-Zip: BOCA RATON FL 33433

Title            DIRECTOR  
Name            SCIDA, LOUIS  
Address        21205 LAGO CIRCLE #14G  
City-State-Zip: BOCA RATON FL 33433

Title            DIRECTOR  
Name            FAULHABER, JACK  
Address        8310 CASA DEL LAGO #1C  
City-State-Zip: BOCA RATON FL 33433

Title            DIRECTOR  
Name            BASSO, RICHARD  
Address        8521 CASA DEL LAGO #34B  
City-State-Zip: BOCA RATON FL 33433

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE: ARTHUR SHARF**

**PRESIDENT**

**03/03/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date