

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04415

Entity Name: BOCA FONTANA HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**

C/O PHOENIX MANAGEMENT SERVICES INC.
4800 N STATE ROAD 7 SUITE 105
LAUDERDALE LAKES, FL 33319

Current Mailing Address:

C/O PHOENIX MANAGEMENT SERVICES INC.
4800 N STATE ROAD 7 SUITE 105
LAUDERDALE LAKES, FL 33319 US

FEI Number: 59-2475800**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**

PHOENIX MANAGEMENT SERVICES INC.
4800 N STATE RD 7
STE 105
LAUDERDALE LAKES, FL 33319 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 OLIVIERI, RALPH
Address 9648 TRITON COURT
City-State-Zip: BOCA RATON FL 33434

Title VP
Name BELL, BEVERLY
Address 9564 TRITON COURT
City-State-Zip: BOCA RATON FL 33434

Title DIRECTOR
Name MOOSAI, SUSAN
Address 4800 N STATE ROAD 7 SUITE 105
City-State-Zip: LAUDERDALE LAKES FL 33319

Title SECRETARY
Name LAMBORGHINI, BARBARA
Address 4800 N STATE ROAD 7 SUITE 105
City-State-Zip: LAUDERDALE LAKES FL 33319

Title DIRECTOR
Name BOUCHARD, MICHELE
Address 4800 N STATE ROAD 7 SUITE 105
City-State-Zip: LAUDERDALE LAKES FL 33319

Title DIRECTOR
Name GLASS, GARY
Address 4800 N STATE ROAD 7 SUITE 105
City-State-Zip: LAUDERDALE LAKES FL 33319

Title TREASURER
Name MONROY, OLGA
Address 19844 COURT OF THE MYRTLES
City-State-Zip: BOCA RATON FL 33434

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: RALPH OLIVIERI**PRESIDENT****04/09/2014**

Electronic Signature of Signing Officer/Director Detail

Date