#### 2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000010162

Entity Name: BOCA WEST COMMUNITY CHARITABLE FOUNDATION, INC.

**FILED** Jan 17, 2022 **Secretary of State** 8466286590CC

Date

# **Current Principal Place of Business:**

20583 BOCA WEST DR BOCA RATON, FL 33434

## **Current Mailing Address:**

P.O. BOX 3070

BOCA RATON. FL 33431 US

FEI Number: 27-3840788 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

BLAIR, LAURENCE I. 100 W CYPRESS CREEK RD SUITE 700 FT LAUDERDALE, FL 33309 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: LAURENCE BLAIR 01/17/2022

Electronic Signature of Registered Agent

Officer/Director Detail:

Title DIRECTOR Title **DIRECTOR** 

Name ADLER, ARTHUR Name **BOILEN. HOWARD** 

Address 7464 REXFORD RD Address 19653 OAKBROOK COURT City-State-Zip: BOCA RATON FL 33434 City-State-Zip: BOCA RATON FL 33434

Title DIRECTOR Title DIRECTOR

STRUL, AUBREY Name Name JANOWER, DONALD

Address 20320 FAIRWAY OAKS DR #362 Address 7723 WIND KEY DRIVE

City-State-Zip: **BOCA RATON FL 33434** BOCA RATON FL 33434 City-State-Zip:

Title DIRECTOR Title **DIRECTOR** 

MACHER, JOEL Name ACKERMAN, YVONNE Name

7420 MAHOGANY BEND CT Address Address 19649 OAKBROOK COURT

City-State-Zip: BOCA RATON` FL 33434 City-State-Zip: **BOCA RATON FL 33434** 

Title DIRECTOR Title **DIRECTOR** 

Name LISSAUER, MICHAEL Name ZENKER, RICHARD

Address 7640 REXFORD ROAD Address

UNIT #2

City-State-Zip: BOCA RATON FL 33434 P.O BOX 3070

BOCA RATON FL 33434 City-State-Zip:

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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: PAMELA WEINROTH Electronic Signature of Signing Officer/Director Detail

01/17/2022 **DIRECTOR** 

### Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name FRANKEL, SHARYN Name ISROFF, CHARLES

Address 7835 LAKESIDE BLVD Address 19187 CHAPEL CREEK DRIVE City-State-Zip: BOCA RATON FL 33434 City-State-Zip: BOCA RATON FL 33434

Title DIRECTOR Title EXECUTIVE DIRECTOR

Name BLANK, STEPHEN Name WEINROTH, PAMELA

Address 21217 CLUBSIDE DRIVE Address P.O. BOX 3070

City-State-Zip: BOCA RATON FL 33434 City-State-Zip: BOCA RATON FL 33431

Title DIRECTOR Title DIRECTOR

Name SILVERMAN, LEON Name STOLLER-WITTENSTEIN, BARBARA

Address 2100 SOUTH OCEAN BLVD Address 2000 S OCEAN BLVE

#505S 108S

City-State-Zip: PALM BEACH FL 33480 City-State-Zip: PALM BEACH FL 33480

Title DIRECTOR Title DIRECTOR

NameSCHAPS, LINDANameGLUCKOW, MICHELLEAddress631 ISLAND DRIVEAddress121 PLAYA RIENTA WAY

City-State-Zip: PALM BEACH FL 33480 City-State-Zip: PALM BEACH GARDENS FL 33418