


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06, 2008 8:00 am
Secretary of State

03-06-2008 90033 013 ****61.25

DOCUMENT # N05000000206

1. Entity Name
CANTERBURY PLACE HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business
3900 WOODLAKE BLVD
309
LAKE WORTH, FL 33463

Mailing Address
3900 WOODLAKE BLVD
309
LAKE WORTH, FL 33463

40039114



2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

02122008 Chg-NP CR2E037 (12/06)

City & State
 City & State

4. FEI Number
20-2847219

Applied For
 Not Applicable

Zip
 Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

BROUGH, CHADROW, & LEVINE, P.A.
1900 N COMMERCE PKWY
WESTON, FL 33326

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PD	BORKENHAGEN, KEVIN	3301 QUANTUM BLVD	BOYNTON BEACH, FL 33426	<input type="checkbox"/>
UPD	SVOPP, STEVE	3301 QUANTUM BLVD	BOYNTON BEACH, FL 33426	<input checked="" type="checkbox"/>
ST	REYNOLDS, MICHAEL	3301 QUANTUM BLVD	BOYNTON BEACH, FL 33426	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
VP	<i>Washby, Steve</i>	<i>3301 Quantum Blvd</i>	<i>Boynton Beach, FL 33426</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
ST	<i>Overmeyer, Heather</i>	<i>3301 Quantum Blvd</i>	<i>Boynton Beach, FL 33426</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: _____ DATE: **2/27/08** DAYTIME PHONE # _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR