2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2012
Secretary of State

DOCUMENT# N10591

Entity Name: SOUTHWINDS AT BOCA POINTE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

C/O SWIFT MANAGEMENT SOLUTIONS
1750 UNIVERSITY DR #205
CORAL SPRINGS, FL 33071 US

New Principal Place of Business:

Current Mailing Address:

C/O SWIFT MANAGEMENT SOLUTIONS
1750 UNIVERSITY DR #205
CORAL SPRINGS, FL 33071 US

New Mailing Address:

FEI Number: 59-2581835 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C/O SWIFT MANAGEMENT SOLUTIONS
1750 UNIVERSITY DRIVE
SUITE # 205
CORAL SPRINGS, FL 33071 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P
Name: MANTON, STEVE
Address: 7595 CINEBAR DRIVE
City-St-Zip: BOCA RATON, FL 33433

Title: SD
Name: MELAMED, BOB
Address: 7659 CINEBAR DRIVE
City-St-Zip: BOCA RATON, FL 33433

Title: VPD
Name: RAMER, BOB DR
Address: 7646 ELMRIDGE DRIVE
City-St-Zip: BOCA RATON, FL 33433

Title: TD
Name: FRIED, STEVE
Address: 7671 CINEBAR DRIVE
City-St-Zip: BOCA RATON, FL 33433

Title: D
Name: SPIEGELMAN, DONALD
Address: 7648 ELMRIDGE DRIVE
City-St-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: STEVE MANTON PD 01/19/2012

Electronic Signature of Signing Officer or Director Date