

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11711

FILED
Mar 16, 2009
Secretary of State

Entity Name: TRENDS AT BOCA RATON HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

POINTE MANAGEMENT
75 NE 6TH AVE #206
DELRAY BEACH, FL 33483 US

New Principal Place of Business:

POINTE MANAGEMENT GROUP
75 NE 6TH AVE #206
DELRAY BEACH, FL 33483 US

Current Mailing Address:

C/O EXCLUSIVE PROPERTY MANAGEMENT
1280 S.W. 36 AVE., SUITE 301
POMPANO BEACH, FL 33069 US

New Mailing Address:

POINTE MANAGEMENT GROUP
75 NE 6TH AVE #206
DELRAY BEACH, FL 33483 US

FEI Number: 59-2670299

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESTEBAMEZ, ERIC
75 NE 6TH AVE #206
DELRAY BEACH, FL 33483 US

Name and Address of New Registered Agent:

ESTEBANEZ, ERIC
75 NE 6TH AVE #206
DELRAY BEACH, FL 33483 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: ERIC ESTEBANEZ

03/16/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LONG, WILLIAM
Address: 22925 OLD INLET BRIDGE DRIVE
City-St-Zip: BOCA RATON, FL 33433

Title: D () Delete
Name: HOLLINGSWORTH, JIM
Address: 23083 SUNFIELD DRIVE
City-St-Zip: BOCA RATON, FL 33433

Title: SD () Delete
Name: CARLOUGH, ROBERT
Address: 22310 SANDS POINT DR
City-St-Zip: BOCA RATON, FL 33433

Title: VPD () Delete
Name: BROWN, GARY
Address: 22231 SANDS POINT
City-St-Zip: BOCA RATON, FL 33433

Title: P () Delete
Name: SAMBUCO, ANGIE
Address: 23035 SUNFIELD DR.
City-St-Zip: BOCA RATON, FL 33433

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: LONG, WILLIAM
Address: 22925 OLD INLET BRIDGE DRIVE
City-St-Zip: BOCA RATON, FL 33433

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ANGIE SAMBUCO

PD

03/16/2009

Electronic Signature of Signing Officer or Director

Date