

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34137

FILED  
Feb 05, 2010  
Secretary of State

**Entity Name:** BOCA SPRINGS ASSOCIATION, INC.

**Current Principal Place of Business:**

% SWIFT MANAGEMENT SOLUTIONS  
1750 UNIVERSITY DR. #205  
CORAL SPRINGS, FL 33071

**New Principal Place of Business:**

**Current Mailing Address:**

% SWIFT MANAGEMENT SOLUTIONS  
1750 UNIVERSITY DR. #205  
CORAL SPRINGS, FL 33071

**New Mailing Address:**

**FEI Number:** 65-0163218      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SWIFT MANAGEMENT SOLUTIONS  
1750 UNIVERSITY DR  
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: VP  
Name: JONES, ASHLEY  
Address: 10261 BOCA SPRINGS DRIVE  
City-St-Zip: BOCA RATON, FL 33428

Title: TD  
Name: STONELAKE, SAMANTHA  
Address: 10029 CITY BROOK RD  
City-St-Zip: BOCA RATON, FL 33428

Title: SD  
Name: CIRILLO, TONY DIR  
Address: 10029 COUNTRY BROOK RD  
City-St-Zip: BOCA RATON, FL 33428

Title: PD  
Name: STONELAKE, JOYCE  
Address: 10404 SUNSTREAM LANE  
City-St-Zip: BOCA RATON, FL 33428

Title: D  
Name: RHODES, BOB  
Address: 10124 CITY BROOK LANE  
City-St-Zip: BOCA RATON, FL 33428

Title: D  
Name: FEASTER JR, DOUGLAS  
Address: 10268 BOCA SPRINGS DRIVE  
City-St-Zip: BOCA RATON, FL 33428

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: JOYCE STONELAKE

PD

02/05/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date