## FILE NOW: FILING FEE IS \$61.25

**NONPROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # N44239**

THE BANYAN ROAD HOMEOWNERS' ASSOCIATION, INC.

Principal Place	of Business	Mailing Address				<b></b> .		
11891 US 1	· · · · · · · · · · · · · · · · · · ·					,   <b>1</b>    <b>  </b>		
STE #201	·							
NORTH PALM	ORTH PALM BEACH FL 33408 NORTH PALM BEACH FL 33408 US						, 4.5,, 6.6,, 5.5,,	
03		00			i			
2 Principal D	nee of Rusiness	2a. Mailing Address			Date Incorporated or Qualifer	d		}
2. Principal Place of Business 21 12391 Banyan Rd 26 22 Mailing Address 25 Mailing Address					07/05/1991			
Suite, Apt. #, etc. Suite, Apt. #, etc.					4. FEI Number		Appl	ied For
12 No. Palm Beal Il. 27					65-0316644		Not	Applicable
City & State City & State					5. Certifcate of Status Desired		\$8.75 Ad	
23 33 S	108 USA	28			3. Certificate of Status Desired		Fee Requ	uired
Zip	Country	Zip	Country		6. Election Campaign Financing	<b>3</b> 🗅	\$5.00 M	
24	25 29 30				Trust Fund Contribution Added to Fees			
	9. Name and Address of Current F	legistered Agent			10. Name and Address of New	Registered A	igent	
<del>,</del>			81	Name				
RYAN, JAMES D				Street Ac	idress (P.O. Box Number is Not Accep	otable)	<del>-</del> -	
11891 US HIGHWAY 1								
STE #201				ļ				
NORTH PALM BEACH FL 33408			84	City			85 Zip Co	ode
	1		l	1		<u>FL</u>		
office or r agent. I a	to the provisions of Sections 617.0502 a egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida, Such change was autho	onzea ov	the corpora	irporation submits this statement for the ation's board of directors. I hereby acc	ept the appoin	itment as regi	stered
SIGNATURE	Signature, typed or printed name of registered agent as	nd title if applicable. /(NOTE: Reg	istered Ager	t signature requ	uired when reinstating)	DATE		
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO C	FFICERS AN		
TITLE	PD	DELETE	1.1 TITLE		STD.	<del></del>	Change	Addition
NAME	KENNA, ELISSA		1.2 NAME		Denue n. Sep	ر مرم	•	Ì
STREET ADDRESS	12210 BANYAN ROAD		1.3 STREET	r address	Denice M. Set 12391 Banyan No Palm But	~ Red	_	ا م
CITY-ST-ZIP	NORTH PALM BEACH FL			T-ZIP	No Palm But	- <u>se.</u>		
TITLE	VPD	☐ DELETE	2.1 TITLE				Change	☐ Addition
NAME	KENNA, ROBERT	, ROBERT 222 N		ĺ				
STREET ADDRESS	12210 BANYAN ROAD 235		2.3 STREE	ADDRESS	ملا المستنبين الأال الرابيات	<u> </u>		
CITY-ST-ZIP	NORTH PALM BEACH FL		2. 4 CITY-S	T-ZIP	·		· · ·	
TITLE	STD	DELETE	3.1 TITLE				Change	Addition
NAME	CHIMERAKIS, LEE		3.2 NAME					
STREET ADDRESS	2000 07 47 7 47 110 7 10		3.3 STREET	T ADDRESS				
CITY-ST-ZIP	NORTH PALM BEACH FL		3.4. CITY-S	IT-ZIP				
TITLE		☐ DELETE	4,1 TITLE				Change	☐ Addition
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREE	TADORESS				
CITY-ST-ZIP			4.4 CITY-S	T-ZIP				-:
TITLE		☐ DELETE	5.1 TITLE	T			Change	☐ Addition
			50 NAME	ļ				'

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address, with all other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

8.1 TITLE

6.2 NAME

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

□ DELETE

176-8064

May 13, 1999 8:00 am Secretary of State

05-13-1999 90038 013 \*\*\*\*61.25

Change

Addition