

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Aug 18, 2004  
Secretary of State**

DOCUMENT# N44239

Entity Name: THE BANYAN ROAD HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

12391 BANYON RD  
NORTH PALM BEACH, FL 33408 US

**New Principal Place of Business:**

**Current Mailing Address:**

11891 US 1  
STE #201  
NORTH PALM BEACH, FL 33408 US

**New Mailing Address:**

FEI Number: 65-0316644      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

RYAN, JAMES D  
11891 US HIGHWAY 1  
STE #201  
NORTH PALM BEACH, FL 33408 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: STD ( ) Delete  
Name: SEXTON, DENICE M  
Address: 12391 BANYON RD  
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: VPD ( ) Delete  
Name: BOGART, BRUCE  
Address: 12321 BANYON RD  
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: STD ( ) Delete  
Name: CHIMERAKIS, LEE  
Address: 12389 BANYAN ROAD  
City-St-Zip: NORTH PALM BEACH, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 for the exemption stated in Section 119.07(3)(i), 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: DENISE SEXTON

STD

08/18/2004

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

\_\_\_\_\_  
Date