

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 08, 2004 08:00 AM
Secretary of State

DOCUMENT # 755118

1. Entity Name

RUSTIC LAKES PROPERTY OWNERS ASSN., INC.



Principal Place of Business

11276 83RD LANE NORTH
WEST PALM BEACH FL 33412

Mailing Address

11276 -83RD LN N.
PALM BCH. GARDENS FL 33412
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2364498

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BOUTWELL, WILLIAM H
11278 86TH STREET NORTH
WEST PALM BEACH FL 33412

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	GRUBER, MIKE	
STREET ADDRESS	11085 86TH STREET NORTH	
CITY - ST - ZIP	WEST PALM BEACH FL 33412	
TITLE	VD	<input type="checkbox"/> Delete
NAME	LEWIS, ROD JR	
STREET ADDRESS	11105 88TH ROAD NORTH	
CITY - ST - ZIP	W PALM BCH FL 33412	
TITLE	TD	<input type="checkbox"/> Delete
NAME	BOUTWELL, WILLIAM	
STREET ADDRESS	11276 83RD LANE NORTH	
CITY - ST - ZIP	WEST PALM BEACH FL 33412	
TITLE	SD	<input type="checkbox"/> Delete
NAME	CANTIN, BEA	
STREET ADDRESS	8193 112TH TERRACE NORTH	
CITY - ST - ZIP	WEST PALM BEACH FL 33412	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
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TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

U00000081634
03/08/04-80157-024 61.25

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

William H. Boutwell

WILLIAM H. BOUTWELL

3/4/04

561-775-2028

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #