


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

FILED
Jul 14, 2004 8:00 am
Secretary of State

07-14-2004 90009 004 ****61.25

DOCUMENT # N13055			
1. Entity Name COUNTRY FAIR AT BOYNTON HOMEOWNERS ASSOCIATION, INC.			
Principal Place of Business C/O ASSOCIATED PROPERTY MANAGEMENT 1928 LAKE WORTH RD. LAKE WORTH FL 33461 US		Mailing Address C/O ASSOCIATED PROPERTY MANAGEMENT 1928 LAKE WORTH RD. LAKE WORTH FL 33461 US	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



MOORE CR2E037 (11/03)

4. FEI Number 59-2661252		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent PATTI HEIDLER LADWIG, P.A. 12765 W. FOREST HILL BLVD., STE. 1312 WELLINGTON FL 33414-4782		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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 qualifications of registered agent.

SIGNATURE: _____ (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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WOEHLKENS, JOANNE		NAME	RUBIN, SANFORD	
STREET ADDRESS	6411 96TH PLAVE SOUTH		STREET ADDRESS	9944-C 61ST WAY SO.	
CITY-STATE-ZIP	BOYNTON BEACH FL 33437		CITY-STATE-ZIP	BOYNTON BEACH, FL 33437	
TITLE	VD	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HAGER, DAN		NAME	PENNER, BEVERLY	
STREET ADDRESS	6389 COUNTRY FAIR CIRCLE		STREET ADDRESS	9871-D WATERMILL CIR.	
CITY-STATE-ZIP	BOYNTON BEACH FL 33437		CITY-STATE-ZIP	BOYNTON BEACH, FL 33437	
TITLE	SD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUBIN, ELLEN		NAME		
STREET ADDRESS	6317 COUNTRY FAIR CIRCLE		STREET ADDRESS		
CITY-STATE-ZIP	BOYNTON BEACH FL 33437		CITY-STATE-ZIP		
TITLE	TD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DOLL, HARRY		NAME		
STREET ADDRESS	9943 62TH TERRACE SOUTH		STREET ADDRESS		
CITY-STATE-ZIP	BOYNTON BEACH FL 33437		CITY-STATE-ZIP		
TITLE		<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARVILLE, BETSY		NAME		
STREET ADDRESS	9914-B 62ND TERRACE SOUTH		STREET ADDRESS		
CITY-STATE-ZIP	BOYNTON BEACH FL 33437		CITY-STATE-ZIP		
TITLE		<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BEHME, DAVID		NAME		
STREET ADDRESS	9870-D WATERMILL CIRCLE		STREET ADDRESS		
CITY-STATE-ZIP	BOYNTON BEACH FL 33437		CITY-STATE-ZIP		

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, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **4/12/04** **561-7321355**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Attachment

FIDELITY FEDERAL
BANK & TRUST

63-8735/2670

COUNTRY FAIR
C/O A.P.M.
1928 LAKE WORTH RD
LAKE WORTH FL 33461

CHECK NO. 005760 CHECK DATE 04/12/04 VENDOR NO DEPSTA

44048697
FLN13055

CHECK AMOUNT

*****61.25

SIXTY-ONE AND 25/100 DOLLARS*****

PAY
TO THE
ORDER OF

DEPARTMENT OF STATE
DIV OF CORP ANNUAL REPORT
P O BOX 1500
TALLAHASSEE FL 32302

James J. Dell
James J. Dell
AUTHORIZED SIGNATURE

⑈005760⑈ ⑆267087358⑆227000⑆546952⑈

FOR SECURITY, THIS DOCUMENT CONTAINS MICRO PRINTING IN SIGNATURE LINE AND A TRUE WATERMARK ON BACK - HOLD TO LIGHT TO VIEW

ENDOR	DEPSTA	DEPARTMENT OF STATE	4/12/04	005760
REF NO	YOUR INV NO	INVOICE DATE	INVOICE AMOUNT	AMOUNT PAID
1545	4/12/04	4/12/04	61.25	61.25
	59-2661252/13055			

COUNTRY FAIR

Total:

61.25

Please issue manual check to replace this check.
Has not cleared bank as of 5/30/04

A/C # 7025

Paul.

Need on Friday

Attachment

apm

Associated Property Management
of the Palm Beaches, Inc.

44048697
#N13055

July 7, 2004

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32313

Re: Country Fair Homeowners' Association, Inc.
Corporate Annual Report

Gentlemen:

Enclosed please find our replacement check #1004 for \$61.25 as well as a copy of the Corporate Annual Report, which was mailed on April 14, 2004 with our original check #576, dated April 12, 2004 for \$61.25 (copy enclosed).

Apparently the check and form were never received by the D.O.C., as the original check has not cleared our bank.

We assume the replacement check and copy of the original report will enable you to process the enclosed. Please contact us if any problems.

Sincerely,
Associated Property Management
of the Palm Beaches, Inc.

Paul Albert

Paul Albert, LCAM
Property Manager

For the Board of Directors
Country Fair Homeowners' Association, Inc.

cc: Board of Directors
APM Accounts Payable

Enclosure