


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2008 8:00 am
Secretary of State

03-03-2008 90201 029 ****61.25

| | | | | | |
|--|---|--|---|--|--|
| 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 - No P.O. Box # Suite, Apt. #, etc. | | 3. Mailing Address 11276 83RD LANE NORTH Suite, Apt. #, etc. | | | |
| City & State Zip | | City & State WEST PALM BEACH, FL Zip 33412 | | Country US | |
| 4. FEI Number 59-2364498 | | | | 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 BOUTWELL, WILLIAM H 11276 83RD LANE N WEST PALM BEACH, FL 33412 | | | 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div> | | |
| 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> <div style="text-align: right;">DATE _____</div> | | | | | |
| Filing Fee is \$61.25 Due by May 1, 2008 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> | | \$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 NAME STREET ADDRESS CITY-ST-ZIP | PD GRUBER, MIKE 8065 112 TH TERRACE N WEST PALM BEACH, FL 33412 | <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD KLINE, BOB 11403 88 TH ROAD NORTH WEST PALM BEACH, FL 33412 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VD LEWIS, ROD JR 11105 88TH ROAD NORTH W PALM BCH, FL 33412 | <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | VD STONE, BILL 11208 88 TH ROAD NORTH WEST PALM BEACH, FL 33412 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TD BOUTWELL, WILLIAM 11276 83RD LANE NORTH WEST PALM BEACH, FL 33412 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <div style="border: 1px solid black; height: 40px;"></div> | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD CANTIN, BEA 8729 112TH TERRACE N WEST PALM BEACH, FL 33412 | <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD STEPHANO, RENEE 11150 83 RD LANE NORTH WEST PALM BEACH, FL 33412 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <div style="border: 1px solid black; height: 40px;"></div> | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | D HUDSPETH, GEORGE 8065 112 TH TERRACE NORTH WEST PALM BEACH, FL 33412 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <div style="border: 1px solid black; height: 40px;"></div> | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | D KIRKLAND, BILL 8690 112 TH TERRACE NORTH WEST PALM BEACH, FL 33412 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 <i>William H. Boutwell</i> | | | WILLIAM H. BOUTWELL, TREASURER | | |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | | | Date 2/13/08 Daytime Phone # 561-775-2028 | | |

SEE BLOCK 11 CONT. ATTACHED

ATTACHMENT 40037047
#755118

Block 11 continued

D

Sanders, George
11086 88th Road North
West Palm Beach, FL 33412

Addition

D

Lewis, Rod
11105 88th Road North
West Palm Beach, FL 33412

Addition

D

Lynn, Mark
11443 81st Court North
West Palm Beach, FL 33412

Addition

D

Andio, Jon
8729 112th Terrace North
West Palm Beach, FL 33412

Addition

D

Morse, Tim
11440 86th Street North
West Palm Beach, FL 33412

Addition