2018 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 758090

Entity Name: BOYNTON LAKES HOMEOWNERS ASSOCIATION NO. 1, INC.

Current Principal Place of Business:

C/O DICKER, KRIVOK & STOLOFF 1818 S. AUSTRALIAN AVENUE SUITE 400 WEST PALM BEACH, FL 33409

Current Mailing Address:

C/O ASSOCIATED PROPERTY MANAGEMENT 8135 LAKE WORTH RD., SUITE B LAKE WORTH, FL 33467 US

FEI Number: 59-2189426

Name and Address of Current Registered Agent:

DICKER, KRIVOK & STOLOFF 1818 S. AUSTRALIAN AVENUE SUITE 400 WEST PALM BEACH, FL 33409 US Certificate of Status Desired: No

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	: DICKER			09/14/2018
	Electronic Signature of Registered Agent		Date	Э
Officer/Dire	ctor Detail :			
Title	PRESIDENT	Title	VP, TREASURER	
Name	GOLD, SANDY	Name	VIDURRIZAGA, SANDRA	
Address	C/O ASSOCIATED PROPERTY MANAGEMENT 8135 LAKE WORTH RD., SUITE B	Address	C/O ASSOCIATED PROPERTY MANAGEMENT 8135 LAKE WORTH RD., SUITE B	
City-State-Zip:	LAKE WORTH FL 33467	City-State-Zip:	LAKE WORTH FL 33467	
Title	SECRETARY	Title	DIRECTOR	
Name	MACINTYRE, JAMES	Name	CAIN, ROXANNE	
Address	C/O ASSOCIATED PROPERTY MANAGEMENT 8135 LAKE WORTH RD., SUITE B	Address	C/O ASSOCIATED PROPERTY MANAGEMENT 8135 LAKE WORTH RD., SUITE B	
City-State-Zip:	LAKE WORTH FL 33467	City-State-Zip:	LAKE WORTH FL 33467	

I hereby 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 all other like empowered.

SIGNATURE: SANDY GOLD

PRESIDENT

Electronic Signature of Signing Officer/Director Detail