

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13055

**FILED**  
**Apr 01, 2014**  
**Secretary of State**  
**CC2153852277**

**Entity Name:** COUNTRY FAIR AT BOYNTON HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O BANYAN PROP MGMT  
3900 WOODLAKE BLVD SUITE 309  
LAKE WORTH , FL 33463

**Current Mailing Address:**

C/O BANYAN PROP MGMT  
3900 WOODLAKE BLVD SUITE 309  
LAKE WORTH , FL 33463 US

**FEI Number: 59-2661252**

**Certificate of Status Desired: No**

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

HILLEY WYANT-CORTEZ  
840 U.S. HIGHWAY 1  
SUITE 345  
NORTH PALM BEACH, FL 33408 US

*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

**Officer/Director Detail :**

Title PD  
Name ROY, AMANDA  
Address C/O BANYAN PROP MGMT  
3900 WOODLAKE BLVD SUITE 309  
City-State-Zip: LAKE WORTH FL 33463

Title D  
Name SCOTTILE, MICHELLE  
Address C/O BANYAN PROP MGMT  
3900 WOODLAKE BLVD SUITE 309  
City-State-Zip: LAKE WORTH FL 33463

Title SDTD  
Name LISA, RIDDLE  
Address C/O BANYAN PROP MGMT  
3900 WOODLAKE BLVD SUITE 309  
City-State-Zip: LAKE WORTH FL 33463

*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: AMANDA ROY**

**PD**

**04/01/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date