

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000006274

**Entity Name:** BANYAN TRAILS PROPERTY OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**1412 S POWERLINE ROAD  
POMPANO BEACH, FL 33069**Current Mailing Address:**1412 S POWERLINE ROAD  
POMPANO BEACH, FL 33069**FEI Number:** 65-0958666**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MIRZA BASULTO & ROBBINS, LLP  
14160 NW 77TH COURT SUITE 22  
MIAMI LAKES, FL 33016-1506 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            PRESIDENT  
Name            MILLER, ROBERT  
Address        1412 S POWERLINE ROAD  
City-State-Zip: POMPANO BEACH FL 33069

Title            D  
Name            FLORA, JULIA S  
Address        1412 S POWERLINE ROAD  
City-State-Zip: POMPANO BEACH FL 33069

Title            DIRECTOR  
Name            CROYLE, DAVID  
Address        1412 S POWERLINE ROAD  
City-State-Zip: POMPANO BEACH FL 33069

Title            TREASURER  
Name            LOPEZ, CHAD  
Address        1412 S POWERLINE ROAD  
City-State-Zip: POMPANO BEACH FL 33069

Title            SD  
Name            VOSS, SHELDON  
Address        1412 S POWERLINE ROAD  
City-State-Zip: POMPANO BEACH FL 33069

Title            VP  
Name            DRABIK, GREGORY  
Address        1412 S POWERLINE ROAD  
City-State-Zip: POMPANO BEACH FL 33069

Title            DIRECTOR  
Name            WILLIAMS, MARCEL  
Address        1412 S POWERLINE ROAD  
City-State-Zip: POMPANO BEACH FL 33069

*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:** MILLER , ROBERT**PRESIDENT****04/28/2015**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date