2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 728665

1. Entity Name
BANYAN SPRINGS PROPERTY OWNERS ASSOCIATION, INC.

FILED
06 JAN 18 AM 9:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
10780 CEDAR PT BLVD. BOYNTON BCH, FL 33437	10780 CEDAR PT BLVD. BOYNTON BCH, FL 33437

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01062006 No Chg-NP CR2E037 (11/05) 06

4. FEI Number
59-2103531
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

DICKER, KRIVOK, & STOLOFF, PA
1818 AUSTRALIAN AVE., S
STE. 400
WEST PALM BEACH, FL 33409

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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 obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	VPD
NAME	BEER, ARTHUR
STREET ADDRESS	10059 53RD WAY S, #801
CITY-ST-ZIP	BOYNTON BEACH, FL 33437
TITLE	SD
NAME	KORNBERG, PHIL
STREET ADDRESS	10053 CHERRYWOOD PL.
CITY-ST-ZIP	BOYNTON BEACH, FL 33437
TITLE	PD
NAME	PRINCE, BARRY
STREET ADDRESS	10118 MANGROVE DR
CITY-ST-ZIP	BOYNTON BEACH, FL 33437
TITLE	SD
NAME	DOW, ROBERT
STREET ADDRESS	5084 ROSEHILL DR., #1-301
CITY-ST-ZIP	BOYNTON BEACH, FL 33437
TITLE	D
NAME	ARIAN, AUDREY
STREET ADDRESS	10173 MANGROVE DR., #105
CITY-ST-ZIP	BOYTON BEACH, FL 33437
TITLE	T
NAME	WALLACH, PETER
STREET ADDRESS	10033 HICKORY WOOD PL
CITY-ST-ZIP	BOYNTON BEACH, FL 33437

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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: Barry Prince PRES 1/6/06 561-734-4511
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #