## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#728665**

FILED Mar 05, 2009 Secretary of State

Entity Name: BANYAN SPRINGS PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
	DAR PT BLVE NBCH, FL 33				
Current Mailing Address:			New Mailing Addr	ess:	
	DAR PT BLVE NBCH, FL 33				
FEI Number:	: 59-2103531	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of	Current Registered Agent:	Name and Address	s of New Registered Agent:	
1818 AUS STE. 400 WEST PAI		E., S FL 33409 US			
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registe	ered office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	BEER, ARTHU 10059 53RD \		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	PLONSKY, MI 10076 CEDAF	) Delete RIAM R POINT BLVD. #401 ACH, FL 33437	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	PRINCE, BAR 10118 MANG		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DOW, ROBER 5084 ROSEHI	) Delete RT LL DR., #1-301 ACH, FL 33437	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BRUSSO, JOE 5306 CEDAR	) Delete EL LAKE DR #201 ACH, FL 33437	Title: Name: Address: City-St-Zip:	() Change () Addition	
City-St-Zip.		) Delete	Title:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: BARRY PRINCE P 03/05/2009