

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 23, 1999 8:00 am
Secretary of State

04-23-1999 90181 042 ****70.00

DOCUMENT # 742830

1. Corporation Name

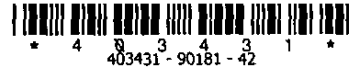
BANYAN TREE VILLAGE CONDOMINIUM ASSOCIATION, INC

Principal Place of Business

GREENLIT PROP. MGT.
141 N.W. 20TH ST., STE. F-2
BOCA RATON FL 33431
US

Mailing Address

GREENLITE PROP. MGMT.
141 N.W. 20TH ST., STE. F-2
BOCA RATON FL 33431
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

05/09/1978

4. FEI Number

59-1684720

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

MARKARIAN, IRENE
555 BANYON TREE LANE
#305
DELRAY BEACH FL 33486

10. Name and Address of New Registered Agent

81 Name GRATTON, ROBERT
82 Street Address (P.O. Box Number is Not Acceptable)
555 BANYAN TREE LANE
83 #206
84 City DELRAY BEACH FL 85 Zip Code 33486

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-14-99

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME GRATTON, ROBERT
STREET ADDRESS 555 BANYAN TREE LANE 206
CITY-ST-ZIP DELRAY BEACH FL

TITLE SD ☐ DELETE

NAME NICKLAW, GALEN
STREET ADDRESS 555 BANYAN TREE LANE #109
CITY-ST-ZIP DELRAY BEACH FL

TITLE VD ☒ DELETE

NAME MARKARIAN, IRENE
STREET ADDRESS 555 BANYAN TREE LANE #305
CITY-ST-ZIP DELRAY BEACH FL

TITLE TD ☐ DELETE

NAME WEISS, MAX
STREET ADDRESS 555 BANYAN TREE LANE #105
CITY-ST-ZIP DELRAY BEACH FL

TITLE D ☐ DELETE

NAME PIERCE, FRED
STREET ADDRESS 555 BANYAN TREE LANE 210
CITY-ST-ZIP DELRAY BEACH FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)