

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743619

FILED
Mar 04, 2011
Secretary of State

Entity Name: THE GREENS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O W. REITER
1600 N.E. 2ND AVE., SUITE #21
BOCA RATON, FL 33432 US

New Principal Place of Business:

Current Mailing Address:

C/O W. REITER
1600 N.E. 2ND AVE., SUITE #21
BOCA RATON, FL 33432 US

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

REITER, WILLIAM
1600 N.E. 2ND AVE, SUITE
#21
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: DP
Name: REITER, WILLIAM
Address: 1600 N.E. 2ND AVE. SUITE #21
City-St-Zip: BOCA RATON, FL 33432

Title: D
Name: MACLACHLAN, STEPHANIE
Address: 6183 GREENVIEW TERRACE
City-St-Zip: BOCA RATON, FL 33433

Title: D
Name: MCGRATH, DANIEL
Address: 22940 GREENVIEW TERRACE
City-St-Zip: BOCA RATON, FL 33433

Title: T
Name: REITER, WILLIAM J
Address: 22904 GREENVIEW TERR.
City-St-Zip: BOCA RATON, FL 33433

Title: DS
Name: BURGAN, SHERRY
Address: 22920 GREENVIEW TERRACE
City-St-Zip: BOCA RATON, FL 33433

Title: D
Name: WALLS, ALAN
Address: 22936 GREENVIEW TERRACE
City-St-Zip: BOCA RATON, FL 33433

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: WILLIAM J REITER

PRES

03/04/2011

Electronic Signature of Signing Officer or Director

Date