

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2006 08:00 AM
Secretary of State

DOCUMENT # 755118

1. Entity Name
RUSTIC LAKES PROPERTY OWNERS ASSN., INC.



Principal Place of Business
**11276 83RD LANE NORTH
WEST PALM BEACH, FL 33412**

Mailing Address
**11276 -83RD LN N.
PALM BCH. GARDENS, FL 33412 US**



01102006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2364498

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**BOUTWELL, WILLIAM H
11276 83RD LANE N
WEST PALM BEACH, FL 33412**

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**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	PD
NAME	GRUBER, MIKE
STREET ADDRESS	11085 86TH STREET NORTH
CITY-ST-ZIP	WEST PALM BEACH, FL 33412
TITLE	VD
NAME	LEWIS, ROD JR
STREET ADDRESS	11105 88TH ROAD NORTH
CITY-ST-ZIP	W PALM BCH, FL 33412
TITLE	TD
NAME	BOUTWELL, WILLIAM
STREET ADDRESS	11276 83RD LANE NORTH
CITY-ST-ZIP	WEST PALM BEACH, FL 33412
TITLE	SD
NAME	CANTIN, BEA
STREET ADDRESS	8193 112TH TERRACE NORTH
CITY-ST-ZIP	WEST PALM BEACH, FL 33412
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/18/06-80005-001 61.25

**DO NOT WRITE
IN THIS SPACE**

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: *William H. Boutwell* **WILLIAM H. BOUTWELL** 1/12/06 561-775-2028

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #