

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 18, 2008 8:00 am
Secretary of State

02-18-2008 90004 004 ****61.25

DOCUMENT # 756825	
1. Entity Name BANYAN SPRINGS PATIO VILLAS ASSOCIATION, INC.	

Principal Place of Business 10780 CEDAR POINT BLVD. BOYNTON BEACH FL 33437	Mailing Address 10780 CEDAR POINT BLVD. BOYNTON BEACH FL 33437
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E037 (10/07)

4. FEI Number 59-2103528		☐ Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CUSTOM PROPERTY MANAGEMENT 2328 S CONGRESS AVE STE 2A WEST PALM BEACH FL 33406		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	

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

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

Make Check Payable to:
Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE SD NAME FOSTER, ALAN STREET ADDRESS 10065 LAURELWOOD PLACE CITY-ST-ZIP BOYNTON BEACH FL 33437	☒ Delete	TITLE STD NAME SHERMAN, ROBERT STREET ADDRESS 10173 CHESTWOOD ROAD CITY-ST-ZIP BOYNTON BEACH, FL 33437	☐ Change ☒ Addition
TITLE PD NAME TYE, SUMNER STREET ADDRESS 5051 PINE DRIVE CITY-ST-ZIP BOYNTON BEACH FL 33437	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE VPD NAME RIFKIN, IRWIN STREET ADDRESS 5082 PINE DR CITY-ST-ZIP BOYNTON BEACH FL 33437	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE D NAME DRESSNER, GERALD STREET ADDRESS 10076 SHADYWOOD PLACE CITY-ST-ZIP BOYNTON BEACH FL 33437	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE TD NAME MARGULIES, HERBERT STREET ADDRESS 5076 PINE DR CITY-ST-ZIP BOYNTON BEACH FL 33437	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE D NAME NICHOLS, ANNE STREET ADDRESS 10082 LAURELWOOD PLACE CITY-ST-ZIP BOYNTON BEACH, FL 33437	☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

[Signature]

4-7-08