

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756825

FILED
Feb 10, 2009
Secretary of State

Entity Name: BANYAN SPRINGS PATIO VILLAS ASSOCIATION, INC.

Current Principal Place of Business:

10780 CEDAR POINT BLVD.
BOYNTON BEACH, FL 33437

New Principal Place of Business:

Current Mailing Address:

10780 CEDAR POINT BLVD.
BOYNTON BEACH, FL 33437

New Mailing Address:

FEI Number: 59-2103528

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CUSTOM PROPERTY MANAGEMENT
2328 S CONGRESS AVE
STE 2A
WEST PALM BEACH, FL 33406 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: STD () Delete
Name: SHERMAN, ROBERT
Address: 10173 CHESTWOOD ROAD
City-St-Zip: BOYNTON BEACH, FL 33437

Title: PD () Delete
Name: TYE, SUMNER
Address: 5051 PINE DRIVE
City-St-Zip: BOYNTON BEACH, FL 33437

Title: VPD () Delete
Name: RIFKIN, IRWIN
Address: 5082 PINE DR
City-St-Zip: BOYNTON BEACH, FL 33437

Title: D () Delete
Name: DRESSNER, GERALD
Address: 10076 SHADYWOOD PLACE
City-St-Zip: BOYNTON BEACH, FL 33437

Title: D () Delete
Name: NICHOLS, ANNE
Address: 10082 LAURELWOOD PLACE
City-St-Zip: BOYNTON BEACH, FL 33437

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SHERMAN, ROBERT
Address: 10173 CHESTWOOD ROAD
City-St-Zip: BOYNTON BEACH, FL 33437

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: RIFKIN, IRWIN
Address: 5082 PINE DR
City-St-Zip: BOYNTON BEACH, FL 33437

Title: VPD (X) Change () Addition
Name: GORDON, EDWARD
Address: 5139 PINE DRIVE
City-St-Zip: BOYNTON BEACH, FL 33437

Title: SD (X) Change () Addition
Name: NICHOLS, ANNE
Address: 10082 LAURELWOOD PLACE
City-St-Zip: BOYNTON BEACH, FL 33437

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: SUMNER TYE

PD

02/10/2009

Electronic Signature of Signing Officer or Director

Date