2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2009
Secretary of State

DOCUMENT# 757115

Entity Name: FORSYTHIA HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1200 S. ROGERS CIRCLE
STE. 3
BOCA RATON, FL 33487 US

New Principal Place of Business:

Current Mailing Address:

1200 S. ROGERS CIRCLE
STE. 3
BOCA RATON, FL 33487 US

New Mailing Address:

FEI Number: 59-2571096 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LIPPMAN, KAREN
1200 S. ROGERS CIRCLE
STE. 3
BOCA RATON, FL 33487 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:	T	( ) Delete
Name:	ALGAZE, JACK	
Address:	15836 FORSYTHIA CIR	
City-St-Zip:	DELRAY BEACH, FL 33484	
Title:	S	( ) Delete
Name:	PARADISO, JOAN	
Address:	15815 FORSYTHIA CIRCLE	
City-St-Zip:	DELRAY BEACH, FL 33484	
Title:	PD	( ) Delete
Name:	MELTZER, SAUL	
Address:	15944 FORSYTHIA CIRCLE	
City-St-Zip:	DELRAY BEACH, FL 33484	
Title:	D	( ) Delete
Name:	ZUCKER, JERROLD	
Address:	15812 FORSYTHIA CIRCLE	
City-St-Zip:	DELRAY BEACH, FL 33484	
Title:	VD	( ) Delete
Name:	WILLIAM, MOFFA	
Address:	15832 FORSYTHIA CIR	
City-St-Zip:	DELRAY BEACH, FL 33484	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	P	(X) Change ( ) Addition
Name:	MELTZER, SAUL	
Address:	15944 FORSYTHIA CIRCLE	
City-St-Zip:	DELRAY BEACH, FL 33484	
Title:	D	(X) Change ( ) Addition
Name:	BERARDINO, JAMES	
Address:	15872 FORSYTHIA CIRCLE	
City-St-Zip:	DELRAY BEACH, FL 33484	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

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: SAUL MELTZER P 04/06/2009

Electronic Signature of Signing Officer or Director — Date