## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#758089** 

FILED Mar 10, 2009 Secretary of State

Entity Name: BOYNTON LAKES PROPERTY OWNERS ASSOCIATION, INC.

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Current Principal Place of Business:			New Princ	New Principal Place of Business:		
C/O VICTO	DRY ACCT SERVICE 24-3214	ES	1500 GATE SUITE 220	WAY BLVD.		
BOYNTON BEACH, FL 334243214 US				BOYNTON BEACH, FL 33426 US		
Current Mailing Address:			New Mailir	New Mailing Address:		
C/O VICTORY ACCT SERVICES P.O. BOX 24-3214			1500 GATE SUITE 220	WAY BLVD.		
	1 BEACH, FL 33424:	3214 US		BEACH, FL 33426	US	
FEI Number:	: 59-2189429 FEI I	Number Applied For()	FEI Number Not Appli	cable ( ) Certific	cate of Status Desired ( )	
Name and	Address of Curren	t Registered Agent:	Name and	Name and Address of New Registered Agent:		
	/ICKI EWAY BLVD I BEACH, FL 33426	US	1500 GATE SUITE 220	ACCOUNTING SERVEWAY BLVD BEACH, FL 33426	·	
	named entity submit e of Florida.	ts this statement for the pu	rpose of changing it	s registered office or	registered agent, or both,	
SIGNATUF	RE: VICKI FIECHT				03/10/2009	
	Electronic Sig	nature of Registered Agen	t		Date	
OFFICERS AND DIRECTORS:			ADDITION	S/CHANGES TO OF	FICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	VP () Delete LUONGO, ELEANORE 37 WINCHMORE LN BOYNTON BEACH, FL		Title: Name: Address: City-St-Zip:	()Change	e()Addition	
Fitle: Name: Address: City-St-Zip:	D ( ) Delete GELBMAN, ALAN 16 FLINT WAY BOYNTON BEACH, FL		Title: Name: Address: City-St-Zip:	()Change	e ( ) Addition	
Fitle: Name: Address: City-St-Zip:	P ( ) Delete MONECK, RICH 4 BOSWELL PL BOYNTON BEACH, FL		Title: Name: Address: City-St-Zip:	()Change	e()Addition	
Title: Name: Address: City-St-Zip:	S ( ) Delete BERNSTEIN, SHEILA 75 MAYFAIR LANE BOYNTON BEACH, FL		Title: Name: Address: City-St-Zip:	()Change	e ( ) Addition	
Title: Name: Address: City-St-Zip:	T () Delete STAFFORD, HEATHER 6 WINCHMORE LANE BOYNTON BEACH, FL	₹	Title: Name: Address: City-St-Zip:	T (X) Change LERNER, TOM 6 CAMDEN LANE BOYNTON BEACH, FL	e ( ) Addition	

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: SCOTT STRALEAU MGR 03/10/2009