## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#760674** 

FILED Apr 27, 2005 Secretary of State

Entity Name: SOUTHLAKE I CONDOMINIUM ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 1 VIA DE CASAS SUR BOYNTON BEACH, FL 33426 **Current Mailing Address: New Mailing Address:** ASSOC PROP MGMT BANYAN PROPETY MANAGEMENT 1928 LAKE WORTH RD 2328 S CONGRESS AVE, SUITE 1C LAKE WORTH, FL 33461 US WEST PALM BEACH, FL 33406 FEI Number: 59-2157871 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ASSOCIATED PROPERTY MGMT. BANYAN PROPERTY MANAGEMENT INC 1928 LAKE WORTH RD. 2328 S CONGRESS AVE SUITE 10 SUITE 1-C LAKE WORTH, FL 33461 US WEST PALM BEACH, FL 33406 US 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: PHILIP DOMINICK 04/27/2005 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition HARTLEY, RAY Name: Name: 3 VIA DE CASA SUR, #103 Address: Address: City-St-Zip: BOYNTON BEACH, FL 33426 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: DAY, TINA Name: Address: 2 VIA DE CASAS SUR #204 Address: City-St-Zip: BOYNTON BEACH, FL 33426 City-St-Zip: Title: () Delete Title: () Change () Addition WHEELAN, LOUISE Name: Name: 3 VIA DE CASAS SUR #103 Address: Address: City-St-Zip: BOYNTON BEACH, FL 33426 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RAY HARTLEY PD 04/27/2005