

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768359

FILED
Feb 15, 2012
Secretary of State

Entity Name: BOCALINDA LAKES PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

THE CONTINENTAL GROUP INC.
6300 PARK OF COMMERCE BOULEVARD
BOCA RATON, FL 33487 US

New Principal Place of Business:

C/O VICTORY ACCOUNTING SERVICES
1500 GATEWAY BLVD, STE 220
BOYNTON BEACH, FL 33426 US

Current Mailing Address:

THE CONTINENTAL GROUP INC.
6300 PARK OF COMMERCE BOULEVARD
BOCA RATON, FL 33487 US

New Mailing Address:

C/O VICTORY ACCOUNTING SERVICES
1500 GATEWAY BLVD, STE 220
BOYNTON BEACH, FL 33426 US

FEI Number: 59-2539102

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GELFAND & ARPE, P.A. C/O MICHAEL GELFAND
1555 PALM BEACH LAKES BLVD.
SUITE 1220
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

VICTORY ACCOUNTING SERVICES
150 GATEWAY BLVD
STE 220
BOYNTON BEACH, FL 33426 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: VICKI FEICHT

02/15/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: MOOTZ, GAIL
Address: P.O. BOX 740425
City-St-Zip: BOYNTON BEACH, FL 33474

Title: VP
Name: SCHMIDT, ROBIN
Address: P.O. BOX 740425
City-St-Zip: BOYNTON BEACH, FL 33474

Title: T
Name: PELKEY, TJ
Address: P.O. BOX 740725
City-St-Zip: BOYNTON BEACH, FL 33474

Title: S
Name: WOOOTEN, JANET
Address: P.O. BOX 740425
City-St-Zip: BOYNTON BEACH, FL 33474

Title: D
Name: MOSCHETTE, FRANK
Address: P.O. BOX 740425
City-St-Zip: BOYNTON BEACH, FL 33474

Title: D
Name: SCHMITT, LARRY
Address: P.O. BOX 740425
City-St-Zip: BOYNTON BEACH, FL 33474

I hereby 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 all other like empowered.

SIGNATURE: GAIL MOOTZ

P

02/15/2012

Electronic Signature of Signing Officer or Director

Date