2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008126

FILED Mar 15, 2004 Secretary of State

Entity Name: BOYNTON BEACH VILLAGE CONDOMINIUM ASSOCIATION, INC.

Littly Nu	ille. DOTNIC	ON BEACH VILLAGE CONDON	IIINIOW ASSOCIATION, INC.		
Current Principal Place of Business:			New Principal Place of Business:		
610 EAGLI DELRAY E	E DRIVE BEACH, FL 33	3444			
Current Mailing Address:			New Mailing Address:		
610 EAGLI DELRAY E	E DRIVE BEACH, FL 33	3444			
FEI Number:	: 59-0238490	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
GOLDSTONE, RICHARD P.A. 2717 WEST CYPRESS CREEK ROAD, SUITE 800 FORT LAUDERDALE, FL 33309 US			FURMAN, EDWARD 610 EAGLE DRIVE DELRAY BEACH, FL 33444 US		
	named entity of Florida.	submits this statement for the p	ourpose of changing its registe	ered office or registered agent, or both,	
SIGNATU	RE: EDWAR	D FURMAN		03/15/2004	
	Electro	nic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD (FURMAN, EDV 610 EAGLE DI DELRAY BEAG	RIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	STD (FURMAN, CHA 610 EAGLE DI DELRAY BEAG	RIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD (FURMAN, DAV 6021 TRIPHAN LAKE WORTH	MMER ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: EDWARD FURMAN PD 03/15/2004