## 2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# N0400006021

Oct 22, 2005 Secretary of State

Entity Name: COLONY PRESERVE OF BOYNTON BEACH HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

400 POST AVENUE 12070 COLONY PRESERVE DRIVE WESTBURY, NY 11590 BOYNTON BEACH, FL 33436

Current Mailing Address: New Mailing Address:

400 POST AVENUE 12070 COLONY PRESERVE DRIVE WESTBURY, NY 11590 BOYNTON BEACH, FL 33436

FEI Number: 90-0136921 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:

CARMAN J. LEON, JR., P.A. 411 E. HILLSBORO BLVD. DEERFIELD BEACH, FL 33441 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:

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 P (X) Change () Addition

 Name:
 MONTER, ELLIOT
 Name:
 COPPINI, TOM

 Address:
 400 POST AVENUE
 Address:
 12070 COLONY PRESERVE DR.

 City-St-Zip:
 WESTBURY, NY 11590
 City-St-Zip:
 BOYNTON BEACH, FL 33436

Title: VD ( ) Delete Title: V (X) Change ( ) Addition Name: SPIRIO, RICHARD Name: PIPHER, DAN

Address: 400 POST AVENUE Address: 12070 COLONY PRESERVE DR.
City-St-Zip: WESTBURY, NY 11590 City-St-Zip: BOYNTON BEACH, FL 33436

Title: STD ( ) Delete Title: T (X) Change ( ) Addition Name: HALBERG, CHARLES Name: ABIRI, ERRYN F

 Address:
 400 POST AVENUE
 Address:
 12070 COLONY PRESERVE DR.

 City-St-Zip:
 WESTBURY, NY 11590
 City-St-Zip:
 BOYNTON BEACH, FL 33436

Title: ( ) Delete Title: S ( ) Change (X) Addition Name: COPPINI, JENNIFER

 Address:
 Address:
 12070 COLONY PRESERVE DR.

 City-St-Zip:
 City-St-Zip:
 BOYNTON BEACH, FL 33436

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: ERRYN ABIRI T 10/22/2005