

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED

08 JUN 13 PM 1:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N04000008071			
1. Entity Name CANYON ISLES HOMEOWNERS ASSOCIATION, INC.			
Principal Place of Business G.R.S. MANAGEMENT ASSOCIATES, INC. 3900 WOODLAKE BLVD, SUITE 309 LAKE WORTH, FL 33463		Mailing Address G.R.S. MANAGEMENT ASSOCIATES, INC. 3900 WOODLAKE BLVD, SUITE 309 LAKE WORTH, FL 33463	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
05212008		Chg-NP CR2E037 (12/06)	
4. FEI Number 20-1528621		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
BROUGH, CHADROW & LEVINE, P.A. 1900 N COMMERCE PKWY WESTON, FL 33326		Name <u>Sachs & Sax</u> Street Address (P.O. Box Number Is Not Acceptable) <u>301 Yamato Rd., Suite 4150</u> City <u>BOCA RATON</u> FL <u>33481</u>	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE <u>[Signature]</u> <i>Sachs & Sax</i>		DATE <u>6/12/08</u>	
Amended AR is \$61.25		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S VINE, SKIPPER J 11186 MILL POND BOYNTON BEACH, FL 33473 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	600131390476 06/17/08--01010--007 **61.25 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SEMME, STACEY 8765 SANDY CREST LANE BOYNTON BEACH, FL 33473 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>7/6/13</u> ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KOEPPAL, ERIC 11102 STONEWOOD FOREST TRAIL BOYNTON BEACH, FL 33473 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ZVP CHINKSAKS, KEITH 11365 SANDSTONE HILL TERR. BOYNTON BEACH, FL 33473 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DUBBYN, STACEY 11292 MISTY RIDGE WAY BOYNTON BEACH, FL 33473 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u>[Signature]</u>		DATE <u>5/23/08</u>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone #	