2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2009
Secretary of State

DOCUMENT# N04000008574

Entity Name: BAYFRONT OF BOYNTON BEACH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

6413 CONGRESS AVE STE 200
BOCA RATON, FL 33487 US

New Principal Place of Business:

Current Mailing Address:

6413 CONGRESS AVE STE 200
BOCA RATON, FL 33487 US

New Mailing Address:

FEI Number: 20-2710608 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CREST MANAGEMENT GROUP, INC
6413 CONGRESS AVE GARY BUDD STE 200
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

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:

Title: P ( ) Delete
Name: MATTHEW, KOBREN
Address: 222 BAYFRONT DR
City-St-Zip: BOYNTON BEACH, FL 33435

Title: D ( ) Delete
Name: BLACK, JASON
Address: 521 BAYFRONT DR
City-St-Zip: BOYNTON BEACH, FL 33435

Title: D ( ) Delete
Name: VALLETTA, DAVID
Address: 5150 NW 17TH ST
City-St-Zip: MARGATE, FL 33063

Title: T ( ) Delete
Name: VAKKETTA, DENISE
Address: 5150 NW 17TH ST
City-St-Zip: MARGATE, FL 33063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: MATHEW KOBREN P 05/01/2009

Electronic Signature of Signing Officer or Director Date