

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000010335

**FILED**  
**Jan 19, 2011**  
**Secretary of State**

**Entity Name:** EQUUS EQUESTRIAN CENTER CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

8721 LYONS RD.  
BOYNTON BEACH, FL 33472

**New Principal Place of Business:**

6835 VIENTO WAY  
BOCA RATON, FL 33433

**Current Mailing Address:**

8721 LYONS RD.  
BOYNTON BEACH, FL 33472

**New Mailing Address:**

6835 VIENTO WAY  
BOCA RATON, FL 33433

**FEI Number:** 20-8485211

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SCHULTZ, STANLEY  
8721 LYONS RD.  
BOYNTON BEACH, FL 33472 US

**Name and Address of New Registered Agent:**

SCHULTZ, STANLEY  
6835 VIENTO WAY  
BOCA RATON, FL 33433 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:

01/19/2011

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SCHULTZ, STANLEY  
Address: 6835 VIENTO WAY  
City-St-Zip: BOCA RATON, FL 33433

Title: VSTD  
Name: LEVINE, ALAN  
Address: 2 SHELDRAKE LANE  
City-St-Zip: PALM BEACH GARDENS, FL 33418

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: STANLEY SCHULTZ

PD

01/19/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date