

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Sep 30, 2009**  
**Secretary of State**

DOCUMENT# N07721

**Entity Name:** SOUTHLAKE PROPERTY OWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**C/O BANYAN PROPERTY MANAGEMENT  
2328 S CONGRESS AVE, STE 1-C  
WEST PALM BEACH, FL 33406**New Principal Place of Business:****Current Mailing Address:**BANYAN PROPERTY MANAGEMENT, INC  
2328 S CONGRESS AVE, STE 1-C  
WEST PALM BEACH, FL 33406**New Mailing Address:****FEI Number:** 59-2765324**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**CORTEZ, HILLY & WYANT PA  
860 US HWY ONE SUITE 108  
NORTH PALM BEACH, FL 33408 US**Name and Address of New Registered Agent:**BAN YAN PROPERTY MANAGEMENT  
2328 S CONGRESS AVE SUITE 1-C  
WEST PALM BEACH, FL 33406 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: MARK QUINN

09/30/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:****Title:** VD ( ) Delete  
**Name:** GERHARDT, BERNARD  
**Address:** 11 VIA DE CASAS SUR # 101  
**City-St-Zip:** BOYNTON BEACH, FL 33426**Title:** SD ( ) Delete  
**Name:** WHEELLEN, LOUISE  
**Address:** 3 VIA DE CASAS SUR # 102  
**City-St-Zip:** BOYNTON BCH, FL 33426**Title:** PD ( ) Delete  
**Name:** GUIDA, SAMUEL  
**Address:** 21 VIA DE CASAS SUR # 204  
**City-St-Zip:** BOYNTON BEACH, FL 33426**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:**

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: SAMUEL GUIDA

PD

09/30/2009

Electronic Signature of Signing Officer or Director

Date