

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 06, 2009
Secretary of State**

DOCUMENT# N09343

Entity Name: BOYNTON BEACH DISTRIBUTION CENTER MASTER ASSOCIATION, INC.

Current Principal Place of Business:

9480 S MILITARY TRAIL
SUITE 4A
BOYNTON BEACH, FL 33436

New Principal Place of Business:

Current Mailing Address:

9480 S MILITARY TRAIL
SUITE 4A
BOYNTON BEACH, FL 33436

New Mailing Address:

FEI Number: 83-0349435 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

DANIELS, STEVEN L
515 N FLAGLER DRIVE
6TH FLOOR
WEST PALM BEACH, FL 33401 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: D () Delete
Name: LEMELL, LEE M
Address: 2930 NORTHWEST COMMERCE PARK DR., #3
City-St-Zip: BOYNTON BEACH, FL 33426

Title: D () Delete
Name: BEKKER, PETER
Address: 2950 NORTHWEST COMMERCE PARK DR., #8
City-St-Zip: BOYNTON BEACH, FL 33426

Title: D () Delete
Name: KNOBBE, NITA L
Address: 9480 S MILITARY TRAIL
City-St-Zip: BOYNTON BEACH, FL 33436

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: NITA L. KNOBBE

D

04/06/2009

Electronic Signature of Signing Officer or Director

Date