2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # N10591

1. Entity Name
SOUTHWINDS AT BOCA POINTE HOMEOWNERS'



FILED May 04, 2007 8:00 am Secretary of State

05-04-2007 90073 044 ****61.25

ASSOCIATION, INC.							7				
C/O DEVELOPMENT CONSULTANTS, INC. C/O 2035 HARDING ST, #200 20			C/O DEV 2035 H	Mailing Address C/O DEVELOPMENT CONSULTANTS, INC. 2035 HARDING ST, #200 HOLLYWOOD, FL 33020 US				IRA RAINI AWA IRAI KAN ANI AWA	110n Olota Orba 240		
2. Principal Place of Business - No P.O. Box # 3. I			3. Mailing	3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			01052007	Chg-NP CR2E	037 (12/06)			
City & State			City & State			4. FEI Number 59-2581	835		pplied For at Applicable		
Zip	Country		Zip	Zip Country		entry	5. Certificate of	f Status Desired	\$8.75 Add Fee Require		
6. Name and Address of Current Regist			Registered /				7. Name and A	7. Name and Address of New Registered Agent			
DEVELOPMENT.CONSULTANTS, INC.					Name						
2035 HARDING STREET STE 200 ATTN: ANDREW MEYROWITZ				-		Street Address (P.O. Box Number is Not Acceptable)					
HOLLYWOOD, FL 33020											
						City		F	_ 1		
8. The above the obligat	named entity tions of registe	submits this statement for red agent.	x the purpose	of changing its r	egistere	ed office or reg	istered agent, or both,	, in the State of Florida. I ar	n familiar with,	and accept	
SIGNATURE	Signature, typed o	r printed hame of registered agent	and title if applical	oie. (NOTE:	Registered	d Agent signature rec	quired when reinstating)	DATE			
								- I			
Filing Fee is \$61.25 Due by May 1, 2007				9. Election Campaign Financing Trust Fund Contribution.			\$5.00 May Be Added to Fees	\$5.00 May Be Added to Fees Make check payable to Florida Department of State			
10.		OFFICERS AND DI	RECTORS		11.		ADDITIONS/CHAP	NGES TO OFFICERS AND D	DIRECTORS IN	10	
TITLE	STD			☐ Delete	TITLE	9	RESIDENT		☐ Change	Addition	
NAME	MITCHEL,	TAMARA				4 '		$\alpha + 1 \wedge \alpha$		-	
STREET ADDRESS	7597 CINE				NAME	: A	اک نسم فر ن	ercing		!	
CITY-ST-ZIP		BAR DR				ET ADDRESS フ	NN RITO SI 634 GIMRI	oge oriv			
TITLE	BOCA RAT	BAR DR ON, FL 33433			STREE	ET ADDRESS フ	NN RITO SI 634 GIMRI	oge drive FL 33433			
IIILE	BOCA RAT		······································	☐ Delete	STREE	ET ADDRESS 7 (ST-ZIP B (NN RITO SI 634 GIMRI	oge oriv	☐ Change	☐ Addition	
NAME	D SOLON, ST	ON, FL 33433	······································	C Delete	STREE CITY- TITLE NAME	ET ADDRESS 7 (ST-ZIP B)	NN RITO SI 634 GIMRI	oge oriv	☐ Change	☐ Addition	
NAME Street address	D SOLON, ST 7601 CINE	ON, FL 33433 FANLEY BAR DR		☐ Delete	STREE CITY- TITLE NAME STREE	ET ADDRESS 7 (B)	NN RITO SI 634 GIMRI	oge oriv	☐ Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	D SOLON, ST 7601 CINE BOCA RAT	ON, FL 33433			STREE CITY- TITLE NAME STREE CITY-	ET ADDRESS 7 (B)	NN RITO SI 634 GIMRI	oge oriv			
NAME STREET ADDRESS CITY-ST-ZIP TITLE	D SOLON, ST 7601 CINE BOCA RAT	FANLEY BAR DR FON, FL 33433		Delete	STREE CITY- TITLE NAME STREE CITY-	ET ADDRESS 7 B C	NN RITO SI 634 GIMRI	oge oriv	☐ Change	Addition Addition	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D SOLON, ST 7601 CINE BOCA RAT VP RAMER, R	FON, FL 33433 FANLEY BAR DR FON, FL 33433 OBERT DR			STREE CITY- TITLE NAME STREE CITY- TITLE NAME	ET ADDRESS ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	NN RITO SI 634 GIMRI	oge oriv			
NAME STREET ADDRESS CITY-ST-ZIP TITLE	D SOLON, ST 7601 CINE BOCA RAT VP RAMER, RI 7646 ELMF	FON, FL 33433 FANLEY BAR DR FON, FL 33433 OBERT DR			STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE	ET ADDRESS 7 B C	NN RITO SI 634 GIMRI	oge oriv			
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY_ST-ZIP	D SOLON, ST 7601 CINE BOCA RAT VP RAMER, RI 7646 ELMF BOCA RAT	FANLEY BAR DR FON, FL 33433 OBERT DR RIDGE DR		☐ Delete	STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY-	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	NN RITO SI 634 GIMRI	oge oriv	☐ Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP TIFLE NAME STREET ADDRESS	D SOLON, ST 7601 CINE BOCA RAT VP RAMER, RI 7646 ELMF	FANLEY BAR DR FON, FL 33433 OBERT DR RIDGE DR FON, FL 33433			STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	NN RITO SI 634 GIMRI	oge oriv			
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY_ST-ZIP TITLE	D SOLON, ST 7601 CINE BOCA RAT VP RAMER, RI 7646 ELMF BOCA RAT	FANLEY BAR DR FON, FL 33433 OBERT DR RIDGE DR FON, FL 33433		☐ Delete	STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME NAME	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	NN RITO SI 634 GIMRI	oge oriv	☐ Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY_ST-ZIP TITLE NAME	D SOLON, ST 7601 CINE BOCA RAT VP RAMER, RG 7646 ELMF-BOCA RAT D SACHS, HE 7636 ELMF	FANLEY BAR DR FON, FL 33433 OBERT DR RIDGE DR FON, FL 33433		☐ Delete	STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE STREE	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP :	NN RITO SI 634 GIMRI	oge oriv	☐ Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY_ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	D SOLON, ST 7601 CINE BOCA RAT VP RAMER, RG 7646 ELMF-BOCA RAT D SACHS, HE 7636 ELMF	FANLEY BAR DR FON, FL 33433 OBERT DR RIDGE DR FN 33433	_	☐ Delete	STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE STREE	ET ADDRESS ST-ZIP	NN RITO SI 634 GIMRI	oge oriv	☐ Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY_ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D SOLON, ST 7601 CINE BOCA RAT VP RAMER, RG 7646 ELMF-BOCA RAT D SACHS, HE 7636 ELMF	FANLEY BAR DR FON, FL 33433 OBERT DR RIDGE DR FN 33433	-	□ Delete 28 Delete	STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY-	ET ADDRESS 7 (B) (C) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S	NN RITO SI 634 GIMRI	oge oriv	Change	Addition .	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D SOLON, ST 7601 CINE BOCA RAT VP RAMER, RG 7646 ELMF-BOCA RAT D SACHS, HE 7636 ELMF	FANLEY BAR DR FON, FL 33433 OBERT DR RIDGE DR FN 33433	-	□ Delete 28 Delete	STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE STREE	ET ADDRESS ET ADDRESS ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	NN RITO SI 634 GIMRI	oge oriv	Change	Addition .	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY_ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D SOLON, ST 7601 CINE BOCA RAT VP RAMER, RG 7646 ELMF-BOCA RAT D SACHS, HE 7636 ELMF	FANLEY BAR DR FON, FL 33433 OBERT DR RIDGE DR FN 33433		□ Delete 28 Delete	STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE STREE	ET ADDRESS ST-ZIP	NN RITO SI 634 GIMRI	oge oriv	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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME STREET ADDRESS

CITY-ST-ZIP

LETTE SMULE.
RE AND TYPED OR PRINTED HANGE OF BIGG ING OFFICER OR DIRECTOR

954-745-1170